

2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 08
Sec

DOCUMENT # H34496 1. Entity Name T.F. BRYDON ENTERPRISES, INC.																																												
Principal Place of Business 14180 S.W. 78TH AVE. MIAMI, FL 33158	Mailing Address 14180 S.W. 78TH AVE. MIAMI, FL 33158																																											
DO NOT WRITE IN THIS SPACE																																												
01042005 No Chg-P CR2E034 (10/03)																																												
4. FEI Number 59-2619796		Applied For ☐ Not Applicable																																										
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																												
6. Name and Address of Current Registered Agent BRYDON, TERANCE F. 14180 S.W. 78TH AVE. MIAMI, FL 33158																																												
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																																												
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE																																												
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> </tr> <tr> <td style="width: 20%; padding: 2px;">TITLE</td> <td style="padding: 2px;">PTD</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">BRYDON, TERANCE F.</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">14180 S.W. 78TH AVE.</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">MIAMI, FL</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">SD</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">BRYDON, CAROLE A.</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">14180 S.W. 78TH AVE.</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">MIAMI, FL</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> </tr> </table> DO NOT WRITE IN THIS SPACE			10. OFFICERS AND DIRECTORS		TITLE	PTD	NAME	BRYDON, TERANCE F.	STREET ADDRESS	14180 S.W. 78TH AVE.	CITY-ST-ZIP	MIAMI, FL	TITLE	SD	NAME	BRYDON, CAROLE A.	STREET ADDRESS	14180 S.W. 78TH AVE.	CITY-ST-ZIP	MIAMI, FL	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																												
SIGNATURE: <u>Terance F. Brydon Pres.</u> <u>3-31-05</u> <u>305-253-1767</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																												