FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # H71936 1. Corporation Name

TSAKO, INC.

CITY-ST-ZIP

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90026 022 ***150.00

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							:
Principal Place	of Business	Mailing Address			/ 1441A11 A111 10001 (1019)6168 (
51076 IDLEWILI TAMPA FL 3363	34	5 107C IDLEWILD AVE. W . TA MPA FL 336 34					
7102	N. SEABURY C	T. 7102 N.	5 E A	Burt C	DO NOT WRI	TE IN THIS SPACE	
	A FL. 33615	TAMPA			3. Date Incorporated or Qualifed 08/20/1985		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			59-2559313	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 A	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the curr	·	
24	25		30	=	Personal Property Tax		.∐No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New I	Registered Agent	
DE04	OLED BIDITLE			81 Name	-	•	
	SLER, JUDITH A.			82 Street Addr	ess (P.O. Box Number is Not Accept	able)	
	N. SEABURY COURT						
IAM	PA FL 33615			83	•		
				84 City		FL 85 Zip C	ode
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the State or femiliar with, and accent the chilig	e of Florida. Such change was at	ıtnorizec	by the corporation	oration submits this statement for the on's board of directors. I hereby acce	of the appointment as re-	registered gistered
SIGNATURE	,				71 8 23 22	125 97	,
SIGNATURE	Signature, typed or printed name of registural ag	ern and troe a spolicable. (NOTE:	r/e/listered	Agent signature require	MUSIT GALLERAND)	Lait	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF		
TITLE	TVP	☐ DELETE	1.1 TI	LE		☐ Change	Addition
NAME	Bessler, Judith A.		1,2 NA	ME			
STREET ADDRESS	7102 N. SEABURY CT.		1,3 S1	REET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		1.4 CI	ry-st-zip		<u> </u>	
TITLE	PS	☐ DELETE	2.1 TT	LE		☐ Change	☐ Addition
NAME	BESSLER, GEORGE R		2.2 N	ME			
STREET ADDRESS	7102 SEABURY		2.3 S1	REET ADDRESS	•		
CITY-ST-ZIP	TAMPA FL 33615		2.4 C	TY-ST-ZIP			
TITLE		☐ DELETE	3,1 TF	le		☐ Change	☐ Addition
NAME			3.2 N/	ME			
STREET ADDRESS	i.		3.3 S1	REET ADDRESS			
CITY-ST-ZIP			3,4. C	TY-ST-ZIP			<u> </u>
TITLE		☐ DELETE	4.1 70			☐ Change	☐ Addition
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP			4,4 CI	ry-st-zip			
TITLE		☐ DELETE	5.1 TI			Change	Addition
NAME			5.2 N	WE	•		
STREET ADDRESS			5 3 S1	REET ADDRESS			
CITY-ST-ZIP			5.4 Ci	ry-st-zip			
TITLE		☐ DELETE	6.1 11			☐ Change	Addition
NAME		— +	6.2 NA	ME		_ •	•
				REET ADDRESS			
STREET ADDRESS	İ						

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

A. BESSLER, UP 1/25/99 Two it