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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J08344

LTM ENTERPRISES, INC.

Principal Place of Business

CITY-\$T-ZIP

SIGNATURE

FILED Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90057 047 ***150.00



% LYN WILLIAMS MINTLE 6586 PINELOCH CT JUPITER FL 33458		% LYN WILLIAMS MINTLE . 6586 PINELOCH CT JUPITER FL 33458		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/09/1986			
2 Principal Pl	ace of Business	2a. Mailing Address		-	4. FEI Number	· Ap	plied For
21 Philospaces	ace of business	26		59-0267702	No	t Applicable	
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.		'	5. Certificate of Status Desired	\$8.75 A	
22	·	27	•				
City & State	•	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip	Country	Zip	Country		8. This corporation owes the current ye	ar Intangible	
24	25 293				Personal Property Tax. Yes No		
	9. Name and Address of Current	Registered Agent		 -	10. Name and Address of New Regist	ered Agent	
	18677		81	Name			
MINTLE, LYN WILLIAMS 6586 PINELOCH CT. JUPITER FL 33458			82	Street Add	ress (P.O. Box Number is Not Acceptable)		1.71
				**	一大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大		
	r · ·		84	City		85 Zip C	Code
ig 				1 -	poration submits this statement for the purpoint's board of directors. I hereby accept the	FL	
agent. La	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	la Statutes	5.	ed when reinstating) / 17 / DA	TE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		Addition :
TITLE	P	☐ DELETE	1.1 TITLE		to the state of th	☐ Change	Addition
NAME	MINTLE, LYN WILLIAMS		1.2 NAME				
STREET ADDRESS	6586 PINELOCH CT.			T ADDRESS	•	•	
CITY-ST-ZIP	JUPITER FL 33458	□ BELETE	1.4 CITY-S	ST-ZIP		☐ Change	Addition
TITLE	·		2.1 TITLE		•	onange	}
NAME	MINITEL, THEODORE II.		2.2 NAME				ţ
STREET ADDRESS	6586 PINELOCH CT.	•		TADDRESS			5
CITY-ST-ZIP	JUPITER FL 33458	☐ DELETE	2. 4 CITY-1	ST-ZIP		□ Change	Addition
TITLE SERVICE		- Deterie	3.1 MLL		*	· —	, — .
NAME	HE CONTROL OF THE PARTY OF THE		1	T ADDRESS	4 45.0	Trong the Ar	250 Kiest (\$4
STREET ADDRESS	BF O. BA		3.4. CITY-	·			
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	31-21	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS		e y	4.3 STREE	T ADDRESS	•		
CITY ST ZIP	1. 1. 1. 1		4.4 CITY-S				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS	TO THE WARRY CONTROL	": "),, ,, ,,,,,,, , ,,,,,,,,,,,,,,,,,,,,		ET ADDRESS			r *
CITY-ST-ZIP	`	Carried Control of Con	5.4 CITY-	ST-ZIP	Control of the State State of Control of the State of Sta		- 100 · 100 · 1
TITLE	型型: 图: 世界域 · 电图: 10.17.10	DELETE	6.1 TITLE			☐ Change	Addition
NAME	Research Control of the Control of t	ा का अन्यास्थ्य करा ना एका प्राप्ता का वर्षे वे देवेदिनोहेंने हैं। 			st passestistestistest Autoritestist ich Stestinun ich bib. Fi	* ********	ł
STREET ADDRESS	शिक्षिकेयों के वा अया	g .	6.3 STREE	ET ADDRESS			

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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in