

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90032 035 ***158.75

DOCUMENT # J29181

1. Entity Name
TDT ENTERPRISES, INC.

Principal Place of Business

Mailing Address

5092 POINTE EMERALD
BOCA RATON FL 33486
US

5092 POINTE EMERALD LN
BOCA RATON FL 33486
US

2. Principal Place of Business

2130 N.E. 53rd ST
Suite, Apt. #, etc.

3. Mailing Address

3561 E. Prescott Cr
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Fort Lauderdale FL

City & State

Cuyahoga Falls OH

4. FEI Number 59-2715611

Applied For
Not Applicable

Zip 33308

Country Broward

Zip 44223

Country Summit

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUGILL, DOROTHY
5092 POINTE EMERALD LANE
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name Kenneth S. Shaffer

Street Address (P.O. Box Number is Not Acceptable)
2130 N.E. 53rd Street

City Fort Lauderdale FL

Zip Code 33308

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.

SIGNATURE

Kenneth S. Shaffer

3/13/01

Signature, typed or printed name of registered agent and address if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE S
NAME HUGILL, THOMAS F., SR.
STREET ADDRESS 629 SE 19 AVE SUITE 204
CITY-ST-ZIP DEERFIELD BEACH FL 33441 ☐ Delete

TITLE P
NAME HUGILL, THOMAS F., JR.
STREET ADDRESS 1900 N. RAVERE RD
CITY-ST-ZIP BATH OH 44333 ☐ Delete

TITLE T
NAME HUGILL, DOROTHY
STREET ADDRESS 5092 POINTE EMERALD LN
CITY-ST-ZIP BOCA RATON FL 33486 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 4321 N.W. 9TH AVENUE
CITY-ST-ZIP Pompano Beach, Florida 33064 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 3561 E. Prescott Circle
CITY-ST-ZIP Cuyahoga Falls, Ohio 44223 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 3561 E. Prescott Circle
CITY-ST-ZIP Cuyahoga Falls, Ohio 44223 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dorothy Hugill Dorothy Hugill

3-09-01

330-928-9090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)