

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J95858 (3)
1. Corporation Name
T.T.S. ENTERPRISES, INC.



Principal Place of Business

Mailing Address

1683 BEARDALL AVE
#153
SANFORD FL 32771
US

1683 BEARDALL AVE
#153
SANFORD FL 32771
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/02/1987

4. FEI Number

59-2867546

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 1683 Beardall Ave.

26 431 Clark Hill Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Sanford FL.

27 Osteen FL.

City & State

City & State

23

28

Zip

Country

24 32771

25 Seminole

Zip

Country

29 32764

30 Volusia

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACKAY, JAMES
250 POWER CT.
SANFORD FL 32771

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

James Mackay

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MACKAY, JAMES
STREET ADDRESS 250 POWER CT
CITY-ST-ZIP SANFORD FL

1.1 TITLE PD
1.2 NAME MACKAY, JAMES
1.3 STREET ADDRESS 1683 BEARDALL AVE
1.4 CITY-ST-ZIP Sanford FL 32771 unit 153

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

James Mackay

4-30-98

11-30-98 11-30-98

CR2E034 (10/97)