Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90248 038 \*\*\*150.00

## 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

<ol> <li>Corporation</li> </ol>	MENT # K14449 Name EN'S TOURING SHOWCASI								
Principal Place	e of Business	Mailing Address				t indiatit ant ciast autit after art			(Rti graft 1881
5309 72ND ST E P.O. BOX 20745 BRADENTON FL 34203 BRADENTON FL 34203-0745					1				
US US						DO NOT WRITE IN THIS SPACE			
						<ol> <li>Date Incorporated or Qualifed 02/05/1988</li> </ol>			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				65-0026817			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A	I
22		27						Fee Re	<del></del>
City & State	e	City & State				6. Election Campaign Financing		\$5.00	
23		28				Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	_ Country ¬			8. This corporation owes the curr	ent year Inta		⊡No
24	25	29 3	<u> </u>			Personal Property Tax.  10. Name and Address of New F	la alabanad i		LINO
	9. Name and Address of Current	nt Registered Agent	81	Name		U. Name and Address of New P	tegistered /	-gent	
CHAI	DWICK, JUDY K.			, value					
5309 - 72ND STREET, EAST			82	Street	t Address	(P.O. Box Number is Not Accepta	ible)		
BRADENTON FL 34203			83	-					_
0,01	DEITHORT 12 0 1200		63						
			84	City			FL	85 Zip (	Code
office or re	to the provisions of Sections 607.05t egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered age	of Florida. Such change was autrations of, Section 607.0505, Florid	onzed by a Statutes	the corp	poration s	tion submits this statement for the board of directors. I hereby accept the reinstating)	purpose of the appoir	changing its	registered gistered
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12
TITLE	PV\$T □ DELETE 1.1		1.1 TITLE					☐ Change	☐ Addition
NAME	JUDY K, CHADWICK 1.2		1.2 NAME						:
STREET ADDRESS	5309 72ND ST EAST 135		1.3 STREET	1.3 STREET ADDRESS					
CITY-ST-ZIP	BRADENTON FL 1.4		1.4 CITY-\$	T-ZIP					
TITLE	☐ DELĒTE 2.11		2.1 TITLE					Change	☐ Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET	ADDRESS	s	•			
CITY-ST-ZIP			2. 4 C/TY-S	T-ZIP				<u>,</u> ,	
TITLE		☐ DELETE	3.1 TITLE					Change	☐ Addition
NAME			3.2 NAME		1				Į
STREET ADDRESS			3.3 \$TREE	TADDRESS	s				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP					C Address
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME )			4. 2 NAME						
STREET ADDRESS			4.3 STREET		8				Ì
CITY-ST-ZIP		F**3 *****	4.4 CITY-S	T-ZIP	<del> </del>			Change	Addition
TITLE		DELETE	5.1 TITLE					☐ Change	
NAME			5.2 NAME	T ADDOCTOR			•		Ì
STREET ADDRESS			5.3 STREET		۱"				ļ
CITY-ST-ZIP			5.4 CITY-S' 6.1 TITLE	1-ZIP	+	·		☐ Change	Addition
TITLE		☐ DELETE	6.2 NAME		1			□ cuange	L. AUGIROIT
NAME				T ADDDESS					ļ
STREET ANDRESS	I		■ 0.3 STREE	T ADDRESS	ا د				l

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, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS

badwick 4-27-99 941751 5549