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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # K41755



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90029 011 ***150.00

 Corporation 	Name						
T.M.H., I	NC.						
1 -241-1 1-) I					I INDIANIA MANAMATANIA	01011 B1611 91011 01011 01	1 1 1 11
•		•					
Principal Place	e of Business	Mailing Address				s Al Ann Didni al Áin Gearc as	#() #J#11 \##1
2737 E OAKLAND PARK BLVD. 2737 E OAKLAND PARK BL			LVD.				
SUITE E SUITE E					BO NOT INDITE IN THIS SPACE		
FT. LAUDERDALE FL 33306 FT. LAUDER		FT. LAUDERDALE FL 33308	DERDALE FL 33306		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal Place of Business		2a, Mailing Address	-		10/19/1988 4 FEI Number	Apr	lied For
-	lace of Business	2a. Mailing Address 26		65-0085239	1 	Applicable	
21 Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8 75 A		
22	m, 6to.	27			5. Certifcate of Status Desired	Fee Red	
City & State	e	City & State	•		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current y	ear Intangible	_
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regis	stered Agent	
0110		·	1	81 Name	·		}
SUPRASKI, LOUIS A.			ŀ	82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
100 NORTH BISCAYNE BLVD. SUITE 1411 NEW WORLD TOWER MIAMI FL 33132				L			
				83			
			ļ	84 City		85 Zip C	ode
				<u> </u>		FL 00 EP 0	intered
11. Pursuant	to the provisions of Sections 607.056 registered agent, or both, in the State	02 and 607.1508, Florida Statut a of Florida. Such change was a	es, the at authorized	bove-named corp I by the corporation	oration submits this statement for the purpon's board of directors. I hereby accept the	appointment as reg	istered
agent. I a	m familiar with, and accept the obliga-	ations of, Section 607 0505, Flo	rida Statu	utes.		1	
SIGNATURE	Nowas /cu	up Pruile	at 1	Agent signature required	Cuandyhan	41-13-59 ATE	}
		ent and little if applicable. (NOTE ND DIRECTORS	13.	Agent signature require	ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	VD OFFICERS AI	DELETE	1.1 TIT	TLE	ADDITIONS OF A CONTROL OF STREET	Change	Addition
NAME	CUNNINGHAM, HOWARD		1.2 NA				l
STREET ADDRESS	2737 E OAKLAND PK BLVD		1.3 ST	REET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1	TY-ST-ZIP			1
TITLE	TT. CHOOCHOALL TE						
NAME	ì	☐ DELETE	2.1 TIT			☐ Change	☐ Addition
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CITY-ST-ZIP			2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA	TLE AME TREET ADDRESS ITY-ST-ZIP TLE		<u>-</u>	
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ÇITY-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.

MUINED OFFICER OR DIRECTOR