## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION **ANNUAL REPORT** 



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

1996

K47621

(3)

**DOCUMENT #**1. Corporation Name

V.T.T. OF T.O.S., INC.



ANA 11507	of Business	Mailing Address			E LOGERTII EKI DIEKL KADIA DINID KODL KIDY DIEKI BIDIK DIDIK DIBKEDIBLE OKDIK DIDIK DIBKEDIBLE OKDIK DIBKEDIBLE OKDIK DIDIK DIDIK DIBKEDIBLE OKDIK DIDIK DID	
8010 WEST MCNAB ROAD NORTH LAUDERDALE FL 33068		8010 WEST MCNAB ROAD NORTH LAUDERDALE FL 33068				
9 0		······································			3. Date Incorporated or Qualified 11/29/1988	3a. Date of Last Report 05/01/1995
2. Principal Place of Business		2a. Mailing Address 26			4. FEI Number 65-0091223	Applied For Not Applicab
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State			6. Election Campaign Financing	Fee Required  \$5.00 May Be
Zip	Country	28			Trust Fund Contribution	Added to Fees
2.10	Country 25	Zip 29	Country 30	'	8. This corporation has liability for a	
	9. Name and Address of Curre				Florida Statutes Yes  10. Name and Address of New Re	
			81	Name	To. Hamo and Address of New Hi	egistered Agent
LINDAUER, ROCHELLE 642 NW 100TH LANE CORAL SPRINGS FL 33071			82 83		t Address (P.O. Box Number is Not Acceptable)	
			84	,		FI 85 Zip Code
familiär with SIGNATURE: _	o agent, or both, in the State of Flor i, and accept the obligations of, Sections are the state of the obligations of the state of the	tion 607.0505, Florida Statute	rized by the corp es. NOTE Representager	oration's po	oration submits this statement for the purp and of directors. I hereby accept the appo	untment as registered agent. Lam
			iar uit i misälisissesi sedea.	a self morae reckno	fert Miten reenstiger.	DATE
2.		DIRECTORS	13.			
	PD	DELETE ☐	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE NAME	PD LINDAUER, BARRY					CERS AND DIRECTORS IN 12
ITLE IAME ITREET ADORESS	PD Lindauer, Barry 642 N.W. 100 Lane		1 1 TITLE	ADORESS		CERS AND DIRECTORS IN 12
ITLE IAME TREET ADORESS ITY-ST-ZIP	PD LINDAUER, BARRY 642 N.W. 100 LANE CORAL SPRINGS FL	☐ DELETE	1 1 TITLE 1 2 NAME 1.3 STREFT 1.4 CHTV - S			CERS AND DIRECTORS IN 12
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ITLE IAME TREEF ADORESS (TY-ST-ZIP ITLE AME TREEF ADDRESS ITY-ST-ZIP	PD LINDAUER, BARRY 642 N.W. 100 LANE CORAL SPRINGS FL STD LINDUAER, ROCHELLE	☐ DELETE	1 1 TITLE 1 2 NAME 1.3 STREET 1.4 CITY-S 2 1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S	1-ZIP ADDRESS		CERS AND DIRECTORS IN 12 Change Addition Change Addition
ITLE IAME TREEF ADORESS (TY-ST-ZIP ITLE AME TREEF ADDRESS (TY-ST-ZIP ITLE	PD LINDAUER, BARRY 642 N.W. 100 LANE CORAL SPRINGS FL STD LINDUAER, ROCHELLE 642 NW 100TH LANE	☐ DELETE	1 1 TITLE 12 NAME 1.3 STREET 14 CITY - S 2 1 TITLE 22 NAME 23 STREET 24 CUTY - S 3 1 TITLE	1-ZIP ADDRESS		CERS AND DIRECTORS IN 12
TILE  AME  TREET ADORESS  ITY-SI-ZIP  TLE  AME  TREET ADDRESS  TY-SI-ZIP  TLE  AME	PD LINDAUER, BARRY 642 N.W. 100 LANE CORAL SPRINGS FL STD LINDUAER, ROCHELLE 642 NW 100TH LANE	☐ DELETE	1 1 TITLE 12 NAME 1.3 STREFT 14 CITY - S 2 1 TITLE 22 NAME 23 STREET 24 CUTY - S 3 1 TITLE 32 NAME	1 - ZIP ADDRESS 1 - Zie <sup>2</sup>		CERS AND DIRECTORS IN 12 Change Addition Change Addition
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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 appears in Block 12 or Block 13 in changed of on an attachment with an address

SIGNATURE:

TUBE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/16 954 722-0912