Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90002 023 ***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

DOCUMENT # LOOSE

 Corporation 	n Name TY'S, INC.								
Principal Place	e of Business	Mailing Addres	SS	· · · · · · · · · · · · · · · · · · ·				1 BIBIL STATE BEAUT B	
C/O GEORGE DONALL 4880 WINDOVER WAY, UNIT C TITUSVILLE FL 32780		C/O GEORGE DONALL 4880 WINDOVER WAY. UNIT C TITUSVILLE FL 32780				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
							11/21/1989		}
2. Principal Pl	lace of Business	2a. Mailing Ad	dress	,.			4. FEI Number 59-2697369		plied For t Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.				5. Certificate of Status Desired	\$8.75 A	
22		27						Fee Re	
City & State	e	City & Stat	te				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zíp	Country	Zip		Country			8. This corporation owes the current year I	ntangible	
24	25	29	30				Personal Property Tax.		□No
	9. Name and Address of Curren	nt Registered Agen	t	81	Nan		10. Name and Address of New Registere	d Agent	
DONALL, GEORGE 4880 WINDOVER WAY UNIT C TITUSVILLE FL 32780				82 83	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)	. 85 Zip C	Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations of the state o	of Florida. Such cha itions of, Section 60	ange was autho 7.0505, Florida	rized by Statutes	the co	rporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its	registered gistered
12.		D DIRECTORS	(17072.1109	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D		DELETE	1.1 TITLE				☐ Change	☐ Addition
NAME	DONALL, GEORGE			1.2 NAME					
STREET ADDRESS	4880 WINDOVER WAY			1.3 STREET		SS			
CITY-ST-ZIP	TITUSVILLE FL		DELETE	1.4 CITY-ST	T-ZIP			Change	☐ Addition
TITLE			DELETE	2.1 TITLE					
NAME				2.2 NAME 2.3 STREET	ADDDE	ee l			
STREET ADDRESS				2.4 CITY-S		33		_	
CITY-ST-ZIP			DELETE	3.1 TITLE	11-21			Change	☐ Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	ADDRE	SS			
CITY-\$T-ZIP				34. CITY-S	T-ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME				4 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRE	ss			
CITY-ST-ZIP				4.4 CITY-57	T-ZIP				
TITLE			DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET		SS			
CITY-ST-ZIP		· · · · · · · · <u> </u>		5.4 CITY-51	T-ZIP				
TITLE			DELETE	6.1 TITLE				Change	Addition
NAME				6.2 NAME		1			

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS