2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 25, 2001 8:00 am Secretary of State

Daytime Phone #

DOCUMENT# POOCOO				-	y or Sta
1 000000	35179		05-2	25-2001 9029	93 038 ***150.0
1. Entity Name W.T. & COMPANY, TNC.					
Principal Place of Business Mailing Address 6202 DENSON DRIVE 6202 DENSON D		N DRIVE	·	Оносон	
ORLANDO, FL ORLAMDO, FL 32 32808		L 32808	1	C0070363	
2. Principal Place of Business	3. Mailing Address			्रिक्ष प्रदूषी को	
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRI	DO NOT WRITE IN THIS SPACE	
City & State	City & State	City & State 4. FEI Number 59-3636927			Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desire	\$8.75	Additional
6. Name and Address of Cui	rrent Registered Agent		7. Name and Address of New	Fee Requ Registered Age	
WAYNE TEELUCKSINGH		Name			
6202 DENSON DRIVE			الواد الريخ الأميل يستوار الراجة الإدار الإدريجية التصريب الا ا		<u> </u>
ORLANDÖ, FL 32808		Street Add	ress (P.O. Box Number is Not Accepta	able)	
		City		FL Zi	p Code
8. The above named entity submits this stat	tement for the purpose of ch	anging ts registered o	ffice or registered agent, or both, in the	e State of Florida	a.
	incks?				
SIGNATURE Signature, typed or printed name	of registered agent and title if ap		ELUCKSINGH istered Agent signature required when reins		0/2001 Date
This corporation is eligible to satisfy its Ir		DW!!! FEE IS \$150.00	10. Election Campaign Fin		\$5.00
gible Tax filing requirement and elects to	11 95 11 15 15 15 15 15 15 15 15 15 15 15 15	2000 Fee will be \$55			e Added to Fees
(See criteria on back)		yable to Department o			
TATAVAIC TECLLICIZED	AND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICE		1 1 2 4 1111
NAME 6202 DENSON DRIVE		PIE TITLE		Change	Addition 8
STREET ADDRESS ORLANDO, FL 32808		ETREET ADDRESS			
CHY-ST-ZIP		CITY - ST - ZIP	·		
NTLE	i Delo	T TLE		Change	Addition
NAME		NAME			}
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TITLE	Dele			Change	Addition
AME .		N/ ME			
STREET ADDRESS		STREET ADDRESS			<u> </u>
CITY - ST - ZIP	ed with this filing does not a	CITY - ST - ZIP	n stated in Section 110 07/3\/i\ Elast	a Statutes I fuell	har cortify that the
information indicated on this report or sur					
I am an officer or director of the corporati					
name appears in Block 11 or Block 12 if o	changed, of on an attachme	n with ar address, with	all other like empowered.		1
	Tellaco	A MANNETE	ELUCKSINGH 5/10/20		27) 050 5:
SIGNATURE: SIGNATURE AND	TYPED OR PRINTED NAME OF				07) 256-5132 ytime Phone #
		C		Da'	vulle clions #