2004 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary of State DOCUMENT # P03000021756 06-02-2004 90004 026 ***150.00 T&T ELITE ENTERPRISES INC. Principal Place of Business Mailing Address 2111 NW 74 AVE 2111 NW 74 AVE SUNRISE, FL 33313 SUNRISE, FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05132004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LIVERPOOL, RUTH Street Address (P.O. Box Number is Not-Acceptable) 8428 W OAKLAND PARK BLVD SUNRISE, FL 33351 Zip Code 8. The above named entit statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of re SIGNATURE (NOTE: Registered Agent signature required when reinstating) agent and title if applicable FILE NOW!!! FEE 15.3550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PD SINGH, KAVITA TITLE ☐ Delete TITLE NAME NAME 2111 NW 74 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNRISE, FL 33313 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ___ Change . . . 🗔 Addition . _ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Date

Daytime Phone #

FILED Jun 02, 2004 8:00 am Division of Corporations

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Page 1

Document Number
P03000021756
Business Entity Name
T&T ELITE ENTERPRISES INC.

After May 1st of each year, a late charge of \$400.00 is imposed, execpt in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

542098123

1	FEI Number Status	○ Appli	ed For	Not Appl	icable 🤇	Ourren	ıt	
	Certificate of Status Des	sired 🔾 Yes	No					
	Pri	ncipal Plac	ce of l	Business				
	Address							
	Suite, Apt. #, etc.							
	City, State SUNRISE , FL							
	Zip Code & Country	33313						
		Mailing	Addr	ess				
ı	Address	2111 NW 74						
11	Suite, Apt. #, etc.							
	City, State	SUNRISE			, FL			
	Zip Code & Country	33313						
Ai-	Name-An	ıd-Address	of Re	egistered /	Agent ·	-	<u>.</u> .	
Name (Last, First, Middle, Title)		LIVERPOOL	_	RUTH]			
-or- R	A Business Name					ahtelessationalisation		
Address		8428 W OAKLAND PARK BLVD						
Suite,	Apt. #, etc.					AURICIAN ARTURE		
City, State		SUNRISE			, FL			
Zip Code & Country		33351	บร					

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a

FEI Number

Division of Corporations	attachner	Page 2 of 2
Division of Corporations	411046125	·
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Registerèd Agent	Signature Sulf Vergoof	Note that the second se
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Document Number P03000021756 Business Entity Name T&T ELITE ENTERPRISES INC.

Election Campaign Financing Trust Fund Contribution © Yes

No

Officer/Director Name And Address

Title	PD		<u>-</u> '			
Name (Last, First, Middle, Title)	SINGH	KAVIT	A			
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O List more than six Officers/Directors

No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

Continue

Reset

Start Over

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