

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2004 OCT 8 PM 2:29

DOCUMENT # P03000131706

1. Entity Name  
T & T AN INTERNATIONAL CORPORATION



Principal Place of Business  
8236 BERKELEY MANOR BLVD.  
SPRING HILL, FL 34604

Mailing Address  
8236 BERKELEY MANOR BLVD.  
SPRING HILL, FL 34604

2. Principal Place of Business  
9121 EDEN AVE  
Suite, Apt. #, etc.

3. Mailing Address  
PO BOX 5250  
Suite, Apt. #, etc.



09082004 Chg-P CR2E034 (10/03)

City & State  
Hudson FL  
Zip  
34604  
Country  
USA

City & State  
Hudson FL  
Zip  
34674  
Country  
USA

4. FEI Number  
260404264  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
VRASPIR, TODD W  
5327 COMMERCIAL WAY  
SUITE A101  
SPRING HILL, FL 34604

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. The above named entity submits this 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 registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## 10. OFFICERS AND DIRECTORS

TITLE PD  
NAME TWIGGS, WILLIE A  
STREET ADDRESS 8236 BERKELEY MANOR BLVD.  
CITY-ST-ZIP SPRING HILL, FL 34604 ☐ Delete

TITLE ST  
NAME TWIGGS, WILLIE A  
STREET ADDRESS 8236 BERKELEY MANOR BLVD.  
CITY-ST-ZIP SPRING HILL, FL 34604 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
400041710504  
10/08/04--01033--010 \*\*158.75

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/04

Date

727 863 8868

Daytime Phone #

10/11/04