2006 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 05, 2006 8:00 am Secretary of State **DOCUMENT # P05000055741** 1. Entity Name 09-05-2006 90025 011 ***150 00 TESS ENTERPRISES INC Principal Place of Business Mailing Address 13150 38TH STREET N 13150 38TH STREET N 60038440 CLEARWATER, FL 33762 CLEARWATER, FL 33762 2. Principal Place of Business Suite, Apt. #, etc. 07252006 CR2E034 (11/05) City & State Applied For 4. FE Number Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current R Name TESS, RICHARD E Street Address (P.O. Box Number is Not Acceptable) 13150 38TH STREET N CLEARWATER, FL 33762 City Zip Code Fl tity 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 reg stered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE 18 \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition TITLE · 🗀 Delete TITLE TESS, RICHARD E NAME NAME 13150 38TH STREET N STREET ADDRESS STREET ADDRESS CLEARWATER, FL 33762 CITY-ST-ZIP CITY-ST-ZIP Delete Change . Addition TITLE TITLE TESS, RICHARD A NAME NAME STREET ADDRESS 6932 ABERFELDY AVE N STREET ADDRESS CITY-ST-ZIP ST PETERSBURG, FL 33709 CITY-ST-ZIF Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change C Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE □ Delete 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 exemptions contained in Chapter 119. 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 SIGNATURE:

FILED