SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000031324

TONY LITTLE ENTERPRISES, INC.

FILED Sep 23, 1999 8:00 am Secretary of State

09-23-1999 90005 016 ***550.00



Principal Place of Business Mailing Address							
7038 CENTRAI	7038 CENTRAL AVE						
ST PETERSBU	RG FL 33707	ST PETERSBURG FL 33707					
US		US				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 04/26/1993	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26				59-3186955	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			C Flashing Companies Financian	<u> </u>	
" 		-			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23		28				 	Added to Fees
Zip			_	Country 8. This corporation owes the current year			
24	25		0				es No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
APPLE TANK A				81	Name		
	LE, TONY R	82 S		Ctroot Addro	no (D.O. Day Mumber in Not Assentable)	*****	
	8-B CENTRAL AVE PETERSBURG FL 33707					ss (P.O. Box Number is Not Acceptable)	
	LILIODONO IL OUIVI	(8		83			
				84	City	FL ⁸	S5 Zip Code
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered							
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered							
agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
						ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	OFFICERS AND DIRECTORS		13.				
TITLE	•	L DELETE	1.1 TITLE		ł	L_J	Change Addition
NAME			1.2 NAM	Æ	ì		
STREET ADDRESS 7038 CENTRAL AVE		1.3 STR		EET A	ADDRESS		
CITY-ST-ZIP ST PETERSBURG FL 33707		1.4 CITY		/-ST-Z	ZI₽		
TITLE		DELETE	2.1 TITLE				Change Addition
NAME		L DELL'E	2.2 NAME		Ì		Change Addition
}							}
STREET ADDRESS			2.3 STREET ADDRESS		NDORESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		ZIP		——————————————————————————————————————
TITLE	DEL		3.1 TITLE				Change Addition
NAME	ME		3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS		DDRESS		Į
CITY-ST-ZiP			3.4 CITY	/_ST-7	7IP		
TITLE				4.1 TITLE			Change Addition
NAME		€ NETC1C	4.2 NAME			Ц	Change [_] Addition
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CITY-ST-ZIP			4.4 CITY		\ \		ĺ
TITLE			5.1 TITLE				Charac Addison
		DELETE	1		ļ	ليا	Change Addition
NAME			5.2 NAM		İ		
STREET ADDRESS			5.3 STRE	EET A	DORESS		
CITY-ST-ZIP			5.4 CITY	f-ST-Z	ZIP		
TITLE		DELETE	6.1 TITL	E			Change Addition
NAME			6.2 NAM	ΙE		-	-
STREET ADDRESS			6.3 STREET ADDRESS		DORESS		ľ
J.INEE ADDRESS			0.0 3 (KE	^			i

6.4 CITY-ST-ZIP 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 of 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 charged, or on an attachment with an address.

SIGNATURE