## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000034910

1. Corporation Name

## **FILED** Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90233 042 \*\*\*150.00

| TIME AF                           | TER TIME INC.  |                                    |                                  |  |   |
|-----------------------------------|--|------------------------------------|----------------------------------|--|---|
| Principal Place                   | e of Business  | Mailing Address                    |                                  |  | 11111 A1A1A 1A1A1 11A1 A41 A41 1A1              |
| 3251 N DIXIE H                    |  | 3251 N DIXIE HWY                   |                                  |  |   |
| FT LAUDERDALE FL FT LAUDERDALE FL |  |                                    |                                  | •  |   |
|                                   |  |                                    |                                  | DO NOT WRITE IN THIS   | SPACE   |
|                                   |  |                                    | <u></u>                          | 3. Date Incorporated or Qualifed 05/13/1993  |   |
| 2. Principal P                    | lace of Business   | 2a. Mailing Address                |                                  | 4. FEI Number  | Applied For                                     |
| 21                                |  | 26                                 |                                  | 65-0396106   | Not Applicable                                  |
| Suite, Apt.                       | #, etc.  | Suite, Apt. #, etc.                |                                  | 5. Certifcate of Status Desired  | \$8.75 Additional                               |
| 22                                |  | 27                                 |                                  |  | Fee Required                                    |
| City & Stat                       | te   | City & State                       |                                  | 6. Election Campaign Financing   | \$5.00 May Be                                   |
| 23                                |  | 28                                 |                                  | Trust Fund Contribution  | Added to Fees                                   |
| Zip                               | Country  | Zip                                | Country                          | 8. This corporation owes the current year Int  |   |
| 24                                | 25   | 29 3                               | 0                                | Personal Property Tax.   | Yes No  |
|                                   | 9. Name and Address of Curr  | ent Registered Agent               | 81 Name                          | 10. Name and Address of New Registered   | Agent   |
| DUIN                              | NICK, ROBERT   |                                    | " " " " V.                       | INICK, KOBERT,   |   |
|                                   | BAYSHORE DR  |                                    | 82 Street Add                    | tress (P.O. Bo) humber s Not Acceptable)   | 11/   |
|                                   | BATSHORE DR  |                                    | 32                               | SIN. SIXIE AV  |   |
| #5                                | AUDEDDALE CL 00004   |                                    | 83                               |  |   |
| FIL                               | AUDERDALE FL 33304   |                                    | 84 City                          | - / 4.15 1   | 85 Zin Code                                     |
|                                   |  |                                    | 1                                | . LAU.DERDALE FL   | 3333  |
| l office or r                     | to the provisions of Sections 607.0<br>registered agent, or both, in the Star<br>am familiar with, and accept the obli | te of Florida. Such change was aut | horized by the corporat          | poration submits this statement for the purpose of<br>tion's board of directors. I hereby accept the appoi | changing its registered<br>ntment as registered |
| SIGNATURE                         | Signature, typed or printed name of registered a   |                                    | egistered Agent signature requir | red when reinstating) DATE   |   |
| 12.                               |  | AND DIRECTORS                      | 13.                              | ADDITIONS/CHANGES TO OFFICERS AN   | ID DIRECTORS IN 12                              |
| TITLE                             | D  | ☐ DELETE                           | 1.1 TITLE                        | RUDNICK KOBERT   | Change  |
| NAME.                             | RUDNICK, ROBERT  |                                    | 1.2 NAME                         |  | 4WV   |
| STREET ADDRESS                    | FAC DAVOLIONE DO ME  |                                    | 1.3 STREET ADDRESS               | 335/ N. WIKE   |   |
| CITY-ST-ZIP                       | FT LAUDERDALE FL 33304   | •                                  | 14 CITY-ST-ZIP                   | ET LAUDER DALE   | FL 33354  |
| TITLE                             | D  | DELETE                             | 2.1 TITLE                        |  | ☐ Change ☐ Addition                             |
| NAME                              | NICHOLS, JOHN  | $\sim$                             | 2.2 NAME                         |  | ]   |
| STREET ADDRESS                    | TARK & TANKSHADE DO  | ,                                  | 2.3 STREET ADDRESS               |  | į   |
|                                   | MIAMI FL   |                                    | 2.4 CITY-ST-ZIP                  | 1  |   |
| CITY-ST-ZIP                       | 1110 0111 1 2  | ☐ DELETE                           | 3.1 TITLE                        |  | Change Addition                                 |
| NAME                              |  |                                    | 3.2 NAME                         |  |   |
| STREET ADDRESS                    |  |                                    | 33 STREET ADDRESS                |  |   |
|                                   | (  |                                    | 3.4. CITY-ST-ZIP                 |  | ļ   |
| CITY-ST-ZIP<br>TITLE              |  | ☐ DELETE                           | 4.1 TITLE                        |  | ☐ Change ☐ Addition                             |
|                                   |  |                                    | 4. 2 NAME                        |  |   |
| NAME                              |  |                                    | 4.3 STREET ADDRESS               |  |   |
| STREET ADDRESS                    |  |                                    |                                  |  | ľ   |
| CITY-ST-ZIP                       |  | ☐ DELETE                           | 4.4 CITY- ST-ZIP<br>5.1 TITLE    |  | ☐ Change ☐ Addition                             |
| TITLE                             |  |                                    | 5.1 IIILE<br>5.2 NAME            |  |   |
| NAME                              |  |                                    | 5.3 STREET ADDRESS               | ·  |   |
| STREET ADDRESS                    | 1  |                                    |                                  |  |   |
| CITY-ST-ZIP                       |  | □ nci etc                          | 5.4 CITY-ST-ZIP<br>6.1 TITLE     |  | Change Addition                                 |
| TITLE                             |  | ☐ DELETE                           |                                  |  | T custing T Production                          |
| NAME                              | 1  |                                    | 6.2 NAME                         |  | Ì   |
|                                   |  |                                    | 6.3 STREET ADDRESS               |  |   |

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 or 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 truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an apprecs with all otherwise empowered.

SIGNATURE: