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PROFIT CORPORATION ANNUAL REPORT 1999



Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE

DOC	UMENT	#	P93000049880
			I JUUUUTJUUU

1. Corporation Name

TINGLER DESIGN AND DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
088 NW 261'H AVE OCA RATON FL 33434	3088 NW 26TH AVE BOCA RATON FL 33434
•	



BOCA RATON FL 33434		BOCA RATUN FL 33434			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 07/09/1993		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ap	op ied For
21		26		65-0425667	. No	ot Applicable	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & S a	te	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Countr	y	8. This corporation owes the current year	Intangible	
24	25 29 30		30		Personal Property Tax.	Yes	[]No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent	
	are areas		81	Name			
	GLER, CHESTER		82	82 Street Address (P.O. Box Number is Not Acceptable)			
	8 NW 26TH AVE			1 333.7.103			
BOO	CA RATON FL 33434		83	3			
			84	City		85 Zip	Code
					poration submits this statement for the purpose	_	_
SIGNATURE	Signature, typed or printed naine of registered age	ent and title if applicable. (NOT NE) DIRECTORS	1. Registered Age	ent signature requi	ADDITI(INS/CHANGES TO OFFICERS	AND DIRECTO	 OF S IN 12
TITLE	OFFICERS AI	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
NAME	TINGLER, CHESTER N		1.2 NAME				
STREET ADDRESS				ET ADDRESS			
	BOCA RATON FL 33434		1.4 CITY-1				
CITY-ST-ZIP	P SO-OT	☐ DELETE	2.1 TITLE	31-21		Change	Addition
NAME	TINGLER, CHESTER N		2.2 NAME				
STREET ADDRESS	0000 1841 00TH 414T			T ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33434		2. 4 CITY-				
TITLE	D	☐ DELETE	31 TMLE			☐ Change	Additi
NAME	TINGLER, ALICE		3.2 NAME				
STREET ADDRE :S	0000 ANAL COTIL ALIE		3.3 STREE	T ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33434		3 4. CITY-	ST-ZIP			
TITLE	٧	☐ DELETE	41 TITLE			☐ Change	Addition
NAME	TINGLER, ALICE		4. 2 NAME	:			
STREET ADDRE S			4.3 STREE	ET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33434		4 4 CITY-	ST-ZIP			
TITLE	S	☐ DELETE	5.1 TITLE	Ì		Change	Addition Addition
NAME	TINGLER, ALICE	,	5.2 NAME				
STREET ADDRE &				ET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33434		5.4 CITY-	ST-ZIP			
TITLE	T	☐ DELETE	6.1 TITLE			Change	☐ Additio
NAME	TINGLER, ALICE	-	6.2 NAME				

BOCA RATON FL 33434 CITY-ST-ZIP 14. I herebit 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 is 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 recuired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

3088 NW 26TH AVE.

STREET ADDRE 3S