

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000050528 (7)

TEDI & CO., INC.

DO NOT WRITE IN THIS SPACE

1. Principal Office Location C/O ROBERTA T JOSEPHSON 521 NW 107 AVE PLANTATION FL 33324		2a. Mailing Address C/O ROBERTA T JOSEPHSON 521 NW 107 AVE PLANTATION FL 33324		3. Date Incorporated or Chartered 07/14/1993	3a. Date of Last Report 08/08/1994
2. Principal Office Location 6755 Sunset Strip	2a. Mailing Address 521 NW 107 Ave	4. FFI Number 65-0425157	Applied For ☐ Not Applicable		
22. Sunrise P.O. #104	27. City, Apt. #, etc.	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required		
23. Florida	28. City & State Plantation Florida	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees		
24. 33313	25. Broward	29. 33324	30. Broward	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent JOSEPHSON, ROBERTA T 521 NW 107 AVE PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL 85 Zip Code

11. I, the undersigned, the president of the corporation, certify that the above named corporation is duly organized and exists in the State of Florida, that a change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am fully qualified to accept the obligations of Section 607.01(2)(b), Florida Statutes.

12. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), Florida Statutes. I further certify that the information is filed on the annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. I am not a director of the corporation or the officer or shareholder permitted to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of shareholders or on an attachment with an address.

12. CHANGES TO OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any)	
NAME	POSITION	NAME	POSITION
JOSEPHSON, ROBERTA T	PRES		
521 NW 107 AVE			
PLANTATION FL 33324			
JOSEPHSON, ROBERTA T, V. Pres			
521 NW 107 Ave			
Plantation FL 33324			
JOSEPHSON, ROBERTA T, Sec			
521 NW 107 Ave			
Plantation FL 33324			
same as above Trez			
same as above			
same as above			

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), Florida Statutes. I further certify that the information is filed on the annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. I am not a director of the corporation or the officer or shareholder permitted to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of shareholders or on an attachment with an address.

SIGNATURE: *Roberta T. Josephson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4/27/95 (305) 476-2696