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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000055035 (7)

TIME TO TONE, INC.

## FILED Mar 31 1998 8:00am Secretary of State



						BANG   BAN   BANA
Principal Place of Business Mailing Address					r enterstat ein enter brack tibet Will Burt	ALLGE ASSIL MASSA (1191 ALLE 1991
889 KINGSLEY AVE. ORANGE PARK FL 32073		668 KINGSLEY AVE. ORANGE PARK FL 32073				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
9 Delevate at D	lless of D				07/22/1994	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. W. etc.		26		59-3255356	Not Applicable	
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & Stato		City & State			Fee Required	
23				6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	<b>28</b>	Coun	tru	Trust Fund Contribution	Added to Fees
24	25	29	30	si <b>y</b>	8. This corporation owes or has paid the	Current year Intangible
<u>•-41</u>	9. Name and Address of Currer		30		Personal Property Tax due June 30.  10. Name and Address of New Register	
WATE	LSON, DOROTHY E			31 Name	10. Hame and Addition from Hogister	oo Agont
	2 BRANSCOMB RD.					
GREEN COVE SPRINGS FL 32043			1	Street Add	dress (P.O. Box Number is Not Acceptable)	
un	CENTOOTE OF MINOS PE 32043		į į	33		mi-+
				14 City		. 85 Zip Code
<u>-</u>						·L
SIGNATURE	m tarninar with, and accept the onlig	alicins of, Section 607.0505, F	iorioa Statu	tes.	rporation submits this statement for the purposation's board of directors. I hereby accept the	
12.	Signature, typed or profed name of registered age	O DIRECTORS (NO	13.	Agent signature requ	Jired when reinstaling) DAT	
TITLE	PVP	DELETE	1.1 TITU		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	WILSON DOROTHY E.		1.2 NAM			Citalige C Audilion
STREET ADDRESS	462 BRANSCOMB RD.			ET ADDRESS		
CITY-ST-ZIP	GREEN COVE SPGS. FL 320	49		-ST-ZiP		
TITLE	ST	DELETE	2.1 TITL			☐ Change ☐ Addition
NAME	WILSON DOROTHY E.	<b>—</b>	2.2 NAM			C Change C Addition
STREET ADDRESS	462 BRANSCOMB RD.			ET ADORESS		
CITY-ST-ZIP	GREEN COVE SPGS. FL 320-	43		(-ST-ZIP		
TITLE		DELETE	3.1 TITLI			Change Addition
NAME			3 2 NAM			
STREET ADDRESS				ET ADDRESS		`
City-St-ZIP				/-ST-ZIP		
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAN	ME		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	51 TITLE			Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE	****	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME			6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			

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 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 changed, or on an attachment with an address

SIGNATURE:

Dwith Cullsin

1-76-90

CR2E034 (10/9)