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01/19/99

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000065593

1. Corporation Name
T. THOMPSON & ASSOC., INC.

Principal Place of Business : 305 POMPANO BEACH BLVD : 711 POMPANO BEACH FL 33602 US
Mailing Address : PO BOX 1543 POMPANO BEACH FL 33061 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Country 30

3. Date Incorporated or Qualified
09/07/1994
4. FEI Number
65-0518152
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 May Be Added to Fees
7. Trust Fund Contribution
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
THOMPSON, TJ
305 POMPANO BEACH, BLVD
APT 203
POMPANO BEACH FL 33062

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. 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 T. J. THOMPSON *T. Thompson* 4/28/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE P DELETE
NAME THOMPSON, WAYNE
STREET ADDRESS 5040B ALABAMA RD
CITY-ST-ZIP RASWELL GA
TITLE VPT DELETE
NAME THOMPSON, RANDALL
STREET ADDRESS 5040 A ALABAMA RD
CITY-ST-ZIP ROSEWELL GA
TITLE S DELETE
NAME THOMPSON, TJ
STREET ADDRESS 305 POMPANO BCH BLVD #203
CITY-ST-ZIP POMPANO BCH FL
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE P Change Addition
1.2 NAME JANIS CUNNINGHAM
1.3 STREET ADDRESS 305 POMPANO BEACH BLVD. #203
1.4 CITY-ST-ZIP POMPANO BEACH, FL 33062
2.1 TITLE VPTS Change Addition
2.2 NAME T.J., THOMPSON
2.3 STREET ADDRESS 305 POMPANO BEACH BLVD. #203
2.4 CITY-ST-ZIP POMPANO BEACH, FL 33062
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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 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, with all other like empowered.

SIGNATURE: *T. Thompson* T. THOMPSON 4/28/99 (954) 941-4231
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)