

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

P91

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 FEB -9 PM 12:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000070775

1. Corporation Name

TD of Florida, Inc.

Principal Place of Business

Mailing Address

500 East Semoran Blvd. Ste. 2B  
Casselberry, Fl. 32707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

9/24/94

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-3286376

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Labret, Steven M  
501 N. Magnolia Avenue Ste. A  
Orlando, Fl. 32801

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	Director
NAME	Giara, Tom
STREET ADDRESS	500 East Semoran Blvd Ste. 2B
CITY-ST-ZIP	Casselberry, Fl. 32707
TITLE	President, Vice President, Director
NAME	Al Jones
STREET ADDRESS	500 East Semoran Blvd. Ste. 2B
CITY-ST-ZIP	Casselberry, Fl. 32707
TITLE	Treasurer, Director
NAME	Syed Ikder
STREET ADDRESS	500 East Semoran Blvd. Ste. 2B
CITY-ST-ZIP	Casselberry, Fl. 32707
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	400001403504
1.2 NAME	-02/10/95--01065--008
1.3 STREET ADDRESS	****200.00 ****200.00
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.07(4)(b), 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: Tom Giara, Tom Giara

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

February 8, 1996 (407) 831-5225

Date

Telephone Number

# TDI, Inc.



500 East Semoran Blvd. Suite 2A Casselberry, Florida 32707

February 2, 1995

Ms. Terri Buckley  
Corporate Specialist  
New Filing Section  
Division of Corporations  
P.O. Box 6327 - T  
Tallahassee, FL 32314

RE: T D OF FLORIDA, INC. DOCUMENT NO. P94000070775  
RESIGNATION OF OFFICER AND DIRECTOR ADDITION OF (2) NEW  
DIRECTORS AND OFFICERS.

Enclosed you will find the resignation of Shawn Dupree,  
as President and Director of T D of Florida, Inc. Please install  
Al Jones as the New President, Vice President and Director and  
Syed Haider as the new Treasurer and Director of T D of Florida,  
Inc. Your expeditious action on this filing will be greatly  
appreciated.

Sincerely,



Thomas C. Garo

Enclosures

RESIGNATION OF OFFICER AND/OR DIRECTOR

AFFIDAVIT

STATE OF Florida :

COUNTY OF Seminole :

BEFORE ME, the undersigned authority, personally appeared Shawn Dupree, who by me being first duly sworn, says to the best of his knowledge, information and belief, and under penalties of perjury:

1. That he has resigned as a President of T D of Florida, Inc. a Florida corporation;  
(Title)  
(Name of Corporation)

2. That the corporation has been notified in writing of the resignation; and

3. That corporate minutes relating to the resignation are unavailable.

FURTHER AFFIANT SAYETH NOT.

Shawn W. Dupree

AFFIANT Produced St. ID #  
D160-799-61-068-0

Sworn to and subscribed before me this 7th day of February, 1995

Rebecca Boto

NOTARY PUBLIC

My Commission Expires: \_\_\_\_\_

FILING FEE IS \$3.00





**FLORIDA DEPARTMENT OF STATE**

**Jim Smith**  
Secretary of State

September 27, 1994

**STEVEN MICHAEL LABRET**  
501 NO. MAGNOLIA AVENUE  
STE. A  
ORLANDO, FL 32801

The Articles of Incorporation for TD OF FLORIDA, INC. were filed on September 26, 1994, and assigned document number P94000070775. Please refer to this number whenever corresponding with this office.

Enclosed is the certification requested.

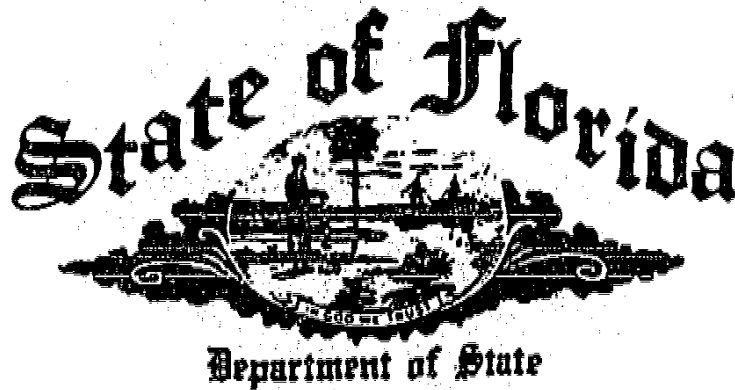
A corporation annual report will be due this office between January 1 and May 1 of the year following the calendar year of the file date year. A Federal Employer Identification (FEI) number will be required before this report can be filed. Please apply NOW with the Internal Revenue Service by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have questions regarding corporations, please contact this office at the address given below.

**Terri Buckley**  
Corporate Specialist  
New Filings Section  
Division of Corporations

Letter Number: 694A00043060



I certify the attached is a true and correct copy of the Articles of Incorporation of TD OF FLORIDA, INC., a Florida corporation, filed on September 26, 1994, as shown by the records of this office.

The document number of this corporation is P94000070775.

Given under my hand and the  
Great Seal of the State of Florida,  
at Tallahassee, the Capital, this the  
Twenty-seventh day of September, 1994



CR2EO22 (2-91)

Jim Smith  
Secretary of State

ARTICLES OF INCORPORATION  
OF  
TD OF FLORIDA, INC.

FILED  
SEP 26 AM 7:44  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

The undersigned, acting as Incorporator(s), desiring to form a corporation for profit pursuant to the Florida General Corporation Act, adopt(s) the following Articles of Incorporation for such corporation:

Article I - Name

The name of this corporation is TD OF FLORIDA, INC.

Article II - Duration

This corporation shall begin its corporate existence as of the filing of these Articles of Incorporation and shall exist perpetually unless dissolved by operation of law.

Article III - General Purpose

This corporation is organized for the purpose of transacting any and all lawful business authorized and not prohibited by the Florida General Corporation Act, as the same may be from time to time amended.

Article IV - Capital Stock

This corporation is authorized to issue Seventy Five Thousand (75,000) shares of capital stock, which shall be designated Common Shares with a par value of one cent (\$1.00).

Article V - Preemptive Rights

Every shareholder, upon the sale for cash of any new stock in this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

Article VI - Initial Registered Office and Agent

The street address of the initial registered office of this corporation is 501 N. Magnolia Ave., Suite A, Orlando, Florida 32801; and the name of the initial registered agent of this corporation at that address is STEVEN MICHAEL LABRET.

Article VII - Initial Board of Directors

A. The initial number of directors of this corporation shall be Two (2).

B. The name and address of the initial members of the Board of Directors who shall hold office until their successors are duly elected and have qualified are:

<u>Name</u>	<u>Address</u>
Tom Garo	500 E. Semoran Blvd., Ste. 21A Casselberry, Florida 32702
Shawn Dupree	500 E. Semoran Blvd., Ste. 21A Casselberry, Florida 32702

Articles VIII - Incorporator

The name and address of the Incorporator of this corporation is:

<u>Name</u>	<u>Address</u>
Steven Michael LaBret	501 N. Magnolia Avenue Suite A Orlando, Florida 32801

Articles IX - By-Laws

The power to adopt, alter or repeal by-laws shall be vested in the Board of Directors.

Article X - Indemnification

This corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by the Florida General Corporate Act.

Article XI - Amendment

The corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholder is subject to this reservation.

Article XII - Corporate Office

That principal office of the business is at 500 E. Semoran Boulevard, Suite 21A, Casselberry, Florida 32702.

IN WITNESS WHEREOF, the undersigned has executed these Articles at Orlando, Florida, this 20 day of September, 1994.

  
STEVEN MICHAEL LABRET

STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 20 day of September, 1994, by Steven Michael LaBret, who:

[X] is (or are) personally known to me, or  
[ ] has produced \_\_\_\_\_ as identification and who  
did (did not) take an oath.

And he acknowledged before me that he read and executed the same and that the facts contained therein are true and correct.

  
NOTARY PUBLIC

(Print Name)  
My Commission Expires

KATHY L. BROOKS  
My Commission CC380047  
Expires 11-01-1998  
Notary Public  
800-422-1555

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent for the above stated corporation at the place designated in the Articles of Incorporation, I hereby agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

  
STEVEN MICHAEL LABRET  
Registered Agent