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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000001573 (1)

1. Corporation Name TODAY'S TERRY, INC.

WEST PALM BEACH FL 33411

Principal Place of Business Mailing Address 8211-1 BAMA LANE 8211-1 BAMA LANE

WEST PALM BEACH FL 33411



| | | | | | | | l l | | | | | | |
|--------------------------------|---|---|-------------------------------|--|-------------------------------|-----------------------|-------------------------|--|-------------------------|--------------------------|--------------------------------|------------------|---|
| | | | | | | | | 3. Date Incorp 01/05 | orated or 6 / 1995 | Qualified | 3a. Date o | I Las | /Report |
| 2. Principal Place of Business | | | — — | 2a. Mailing Address | | | | 4. FEI Numbe | -0544 | //-71 | | 7 | Applied For |
| 21 | | | 26 | | | | | <u> </u> | -057 | 5// | | 1_ | Not Applicable |
| 22 | Suite, Apt. #, etc. | | 27 | Suite, Apt. #, etc. | | | | 5. Certificate of | of Status D | esired | | 7 | 75 Additional se Required |
| 23 | City & State | | 28 | Oity & State | | | | Election Ca Trust Fund | | _ | | | .00 May Be ided to Fees |
| 24 | Ζiρ | Country 25 | 29 | Ζip | Country 30 | | | 8. This corpor Florida Stal | | | intangible tax No | unde | rs 199.032, |
| | o Name | e and Address of Cu | rrent Registe | ered Agent | | | 1 | 0. Name and | Address | of New F | legistered A | gent | |
| | | | <u> </u> | | 81 | Name | ; | | | | | | |
| | MAGNUSON, KF 2000 GLADES R | RISTINE A ROAD, SUITE 208 | | | 82 | Street | Address | (P.O. Box Nur | nber is Not | t Acceptat | ole) | | |
| | BOCA RATON F | L 33431 | | | 83 | | | | | | | | |
| | | | | | 84 | City | | | | | FL | 85 | Zip Code |
| 11 | Pursuant to the provis or registered agent, o | sions of Sections 607.0 ir both, in the State of | 0502 and 607 Florida, Such | .1508, Florida Statute change was authorize | es, the above red by the corp | named co oration's | corporatio s board o | n submits this f directors. The | statement ereby acce | for the pu pt the app | rpose of char cintment as r | nging registe | its registered office ered agent. I am |

| 12. | OFFICERS AND DIRECT | ORS | 13. | d when the studies DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | |
|-----------------|--------------------------|----------|---------------------|---|----------|--|--|--|
| TITLE | D | DELETE | 1 TITLE | Change | Addition | | | |
| NAME | KENNY, JUDITH F | | 1.2 NAME | | | | | |
| STREET ADDRESS | 1116 NORTHUMBERLAND CT. | | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33414 | | 14 CITY ST-ZIP | | | | | |
| THLE | 0 | DELETE | 2 1 Hit!É | Change [| Addition | | | |
| NAME | KENNY, CHRISTOPHER | | 2.2 NAME | | | | | |
| STREET ADDRESS | 1116 NORTHUMBERLAND CT. | | 2.3 S'REET ADDRESS | · | | | | |
| CITY - S1 - ZIP | WEST PALM BEACH FL 33414 | | 2.4 C(1Y - S1 - Z(F | | | | | |
| TITLE | | DELETE | 3 1 THEF | ☐ Change ☐ | Addition | | | |
| NAME | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | 33 STREET ADDRESS | | | | | |
| CITY - ST - ZIP | | | 34 CITY - ST - 7-P | | | | | |
| TITLE | | ☐ DELETE | 4 1 TrTLE | Change [| Addit:o | | | |
| NAME | | | 4 2 NAME | | | | | |
| STREET ADDRESS | | | 4 3 STREET ADDRESS | | | | | |
| CITY - ST - ZIP | | | 4.4 City - St - ZiP | | | | | |
| TITLE | | DELETE | 5 1 TITLE | Change [| Addition | | | |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIF | | | 5 4 CiTY - ST - ZiP | | | | | |
| TITLE | | DELETE | 6 1 TITLE | Change [| Addition | | | |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | | | |
| 0.7.4 07 7.5 | | | . 64 CUV SI 210 | | | | | |

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 119.07(3)(k), 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: