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 #

P95000005359 (1)

TIMBRA, INC.

FILED Apr 15 1998 8:00am Secretary of State

					_					
Principal Plac	e of Business	Mailing Address				a immetally lift (4:10) aidin a thin Abidi Maisi a	\$111 \$ \$10) \$1100 (11)	AL ALLIA SEAL LE DI		
11276 NW	14TH COURT	11276 NW 14TH COUR	RT							
PEMBROKE	PINES FL 33026	PEMBROKE PINES FL	PEMBROKE PINES FL 33026			DO NOT WOITE IN THE OP A OF				
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						01/17/1995				
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For		
21		26				65-0552985		Not Applicable		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional		
City 9 City		27						Required		
City & Stat	θ	——— ·	City & State			6. Election Campaign Financing		O May Be		
23 Zip	Country	28 Zip	Zip Country			Trust Fund Contribution		d to Fees		
24	25	29	30	,		 This corporation owes or has paid the Personal Property Tax due June 30. 		ntangible]		
24	9. Name and Address of Curre		1301			10. Name and Address of New Registe		23 140		
F	OLAND, RANDALL G	-		81	Name					
	1276 NW 14TH COURT				Observation April 1	(D.O. David)				
	EMBROKE PINES FL 33026			82	Street Addi	ress (P.O. Box Number is Not Acceptable)				
				83			··			
			Ī	84	City		FL 85 Zij	Code		
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	tes, the ab	ove	-named corp	poration submits this statement for the purporation's board of directors. I hereby accept the		its registered		
office or r agent. I a	e gistered agent, or both, in the State im fa miliar with, and accept the oblig	oof Florida. Such change was lations of, Section 607.0505, Fl	the corporat	tion's board of directors. I hereby accept the	appointment a	is registered				
SIGNATURE										
12.	Signature, typed or printed name of registered ag-	ont and title if applicable. (NO* ID DIRECTORS	13.	Ager	nt signature requir	red when reinstaling) DA ADDITIONS/CHANGES TO OFFICERS		DC IN 12		
TITLE	P	DELETE	1.1 TIT	i F		ADDITIONS/CHANGES TO OFFICERS	Change			
NAME	FOLAND, RANDALL G		1.2 NA							
STREET ADDRESS	11276 NW 14TH COURT				ADDRESS					
CITY-ST-ZIP	PEMBROKE PINES FL		1.4 CITY-ST-ZI		l					
TITLE	D	DELETE		2.1 TITLE			Change	Addition		
NAME	FOLAND, DONA L		2.2 NA	ME						
STREET ADDRESS	11276 N.W. 14TH CT.		ı	2.3 STREET ADDRESS						
CITY-ST-ZIP	PEMBROKE PINES FL		2. 4 CI							
TITLE		DELETE		3.1 TITLE			Change	Addition		
NAME			3.2 NAI	Mξ						
STREET ADORESS			3.3 STF	IEET A	address			ļ		
CITY-ST-ZIP			3 4. CIT	Y-\$	T-ZIP					
TITLE		☐ DELETE	4.1 111				Change	☐ Addition		
NAME			4.2 NA	ME				J		
STREET ADDRESS			4.3 STF	EET A	ADDRESS			ŀ		
CITY-ST-ZIP			4.4 CIT	4.4 CITY - ST - ZIP						
TITLE		☐ DELETE	5.1 TITI	.E	T	··	Change	☐ Addition		
NAME			5.2 NAI	ME	1			}		
STREET ADDRESS			5.3 STR	EET A	ADDRESS			1		
CITY-ST-ZIP			5.4 CIT	Y-ST	- ZIP		·			
TITLE		☐ DELETE	6.1 TIT	.ŧ			☐ Change	Addition		
NAME			6.2 NA	ΝE	1			J		
STREET ADDRESS			6.3 STR	EET A	address					
CITY-ST-ZIP	1.	· · · · · · · · · · · · · · · · · · ·	6.4 CIT	Y - S1	- ZIP					

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 roceiver 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 chapted. The property of the corporation or the same legal effect as if made under oath; that I am an officer or Block 13 if chapted.

4/4/98