SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998



, FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000017791 (1)

TIK TIME, INC.

FILED Aug 11 1998 8:00am Secretary of State

·								
Principal Place	e of Bus iness	Mailing Address					BILL ODERS HÆIT INREL FARIN INFRE HAL IN INRE	
12601 W. SUNRISE BLVD. SUNRISE FL 33323		5626 N PARK RD FT. LAUDERDALE FL 33312 US				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 03/02/1995	į.	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applied For	
21		26				65-0570944	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional	
22		27	27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			6. Election Campalgn Financing	, \$5.00 May Be		
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country			8. This corporation owes or has paid		
24	9. Name and Address of Current		30			Personal Property Tax due June 3 10. Name and Address of New Regi		
A1.44		Kedistelen Wallt	B1	1	Name	To. Name and Address of New Reg	stered Auent	
	A, EU							
	NORTH PARK ROAD		82 Stre		Street Addres	Address (P.O. Box Number is Not Acceptable)		
FI. L	AUDERDALE FL 33323		83	3				
			84	4 (City		E S5 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 tille if earlieghts (MOT)	E: Dagielared	Acar	al nigoalure regula	od when reinstaling)	DATE	
12.	OFFICERS AND		13.	Mydi	ni signature require	ADDITIONS/CHANGES TO OFFIC		
TITLE	0	DELETE	1,1 TITLE			7.55111671671571525 10 01116	Change Addition	
NAME	NAIM, ELI	1.2 NA				Sitalige Addition		
STREET ADDRESS	TARREST DAMES DO		1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	PE ALIDEDDALE PLAGAGE		1.4 CITY-S	1.4 CITY-ST-ZIP				
TITLE			2.1 TITLE		Change Addition		2 Change Addition	
NAME	ASSULIN, ITZHAK		2.2 NAME				<u> </u>	
STREET ADDRESS				3 STREET ADDRESS			2	
CITY-ST-ZIP	OAKLAND PARK FL 33309		2.4 CITY-ST-ZIP		iP		, pin	
TITLE	DELETE		3.1 TITLE				Change Addition	
NAME			3.2 NAME				•	
STREET ADDRESS			3.3 STREE	:3 STREET ADDRESS				
CITY-ST-ZIP	I-ZIP		3.4 CITY-ST-ZIP		P			
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NAME			4.2 NAME					
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CITY-ST-ZIP				4.4 CITY-ST-ZIP				
TITLE	t better		5.1 TITLE				Lange L Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZII	P			
TITLE	C occert			6.1 TITLE		gaing gants dance cannot be the result of	Change Addition	
NAME				6.2 NAME		900002615539 -08/13/9801091 04 9		
STREET ADDRESS			6.3 STREET ADDRESS			~₩*150.00	317-1043	
CiTY-ST-ZIP	artify that the information cumuliar with	this filing does not qualify for the	6.4 CITY-S				certify that the information	
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.								

Pfd

TIK TIME, INC. 5628 N. PARK ROAD FT. LAUDERDALE, FLORIDA 33312

August 4, 1998

Florida Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

This is my second request from the Division of Corporations to waive the reinstatement penalty of \$400.00. I mailed my first request but did not get a response until today. As I stated previously, I never received the first notice and I did not know about it. I have had this corporation since 1995 and I always paid the fees and licenses as long as I received the renewals in the mail. I did not remember to pay the fee because I did not get the renewal form. I had many cases were mail is mailed to the mall, but the mall is so big that I never get my mail. I am changing the mailing address to my own private residence to make sure that I receive all the mail.

l ask you please to waive this large penalty and accept the regular fee of \$150.00. Many thanks for your understanding.

Sincerely,

Eli Naim, President