Jan 26 2004 5:00PM

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State
02-20-2004 90013 040 ***150.00

P95000017791

1. Entity Name
TIK TIME, INC.

94018961

Principal Place of Business
2777 S OAKLAND FOREST DR
303
OAKLAND PARK, FL 33309

Mailing Address
2525 N. STATE RD. 7
115
HOLLYWOOD, FL 33021 US

01262004

4. FEI Number
65-0572405

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LEVY, STEVE Z
2525 N. STATE RD. 7, STE 115
HOLLYWOOD, FL 33021

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ASSULIN, IZHAK
STREET ADDRESS	2777 S OAKLAND FOREST DR #303
CITY-ST-ZIP	OAKLAND PARK, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2-15-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date