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 # 1. Corporation Name P95000023451 (4)

TEMPUS LIMITED ENTERPRISES, INC.

Mailing Address
7332 CASTLE DR SARASOTA FL 3424

FILED Jul 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I IODANOBI INO IFIOI BAHA BUNA DOMIL DON	\$ 00010 11000 11111 01001 01101 (101 1001	
7332 CASTLE DR 7332 CASTLE DR						
SARASOTA FL 34240 SARASOTA FL 34240					DO NOT WRITE	IN THIS SPACE
					3. Date Incorporated or Qualified	
					03/23/1995	
· ·	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
21	A 44.	26			65-0568023	Not Applicable
Suite, Apt.	₩, G IC.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	9	City & State		***************************************	6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid	,
24	25	29	30		Personal Property Tax due June 3	
	Name and Address of Currer PLE 5 PLE 5 P. PLE 5 P	it Hegistered Agent		31 Name	10. Name and Address of New Reg	Istered Agent
	Syp ula, Philip E 2070 Ri ngling Blvd.					
	RAŜOTA FL 34237		'	32 Street Add	Iress (P.O. Box Number is Not Acceptable	e)
	INDOINTE OTEN		į.	33		
				34 City		85 Zip Code
				'		
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	ites, the about	ove-named cor	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing its registered
agent.	mamiliar with, and accept the oblig	ations of Section 607.0505. F	lorida Statu	tes.	mona board of directors. Thoraby accept	the appointment as registered
SIGNATURE	Dam Do	lerm				
12.	Signature, typed or printed name of registered age	D DIRECTORS (NC	13.	Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 7(1)	E	7.007.107.007.11.11.00.00 10 01110.	Change Addition
NAME	NOTERMAN, PAMELA W		1.2 NAN	1E		
STREET ADORESS	7332 CASTLE DR		1.3 \$TR	EET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34240		1.4 CITY	r-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 T(T)	£		Change Addition
NAME	NOTERMAN, JOHN		2.2 NAN	í		
STREET ADDRESS	7332 CASTLE DR. SARASOTA FL			EET ADDRESS		
CITY-\$T-ZIP TITLE	ST ST	™ DELETE	2. 4 CIT 3.1 TITL	Y-ST-ZIP		Change Addition
NAME	SINGER, CARMEN	An secul	3.2 NAN			C Summer C Longition
STREET ADDRESS	8363 EAGLE XING			EET ADDRESS		
CITY-ST-ZIP	SARASOTA FL			Y-ST-ZIP	_	
TITLE	0	⋈ DELETE	4.1 TITE			Change Addition
NAME	SINGER, JIM		4. 2 NAI	NE		
STREET ADDRESS	8363 EAGLE XING			EET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	54 Dripes		'-ST-ZIP		110
TITLE	D TOICRED LADOV	DELETE	5.1 TITU	i	600002588	Change Addition
NAME CTREET ADDRESS	TRIEBER, LARRY 3835 WILSHIRE CIR.		5.2 NAN	1	-07/13/980109	6037
STREET ADDRESS CITY-ST-ZIP	SARASOTA FL			EET ADDRESS - ST - ZIP	***150.00	
TITLE	WHANDOLU IF	DELETE	6.1 THTL		n.	Change Addition
NAME			6.2 NAN		0/1/10	
STREET ADORESS			1	EET ADDRESS	• •	
CITY-ST-ZIP				-ST-ZIP	_	

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.

SIGNATURE: