## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 1999



FLORIDA DE PARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P95000046607
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T&T ENTERPRISES OF PEMBROKE PINES, INC.				C)	. 618	
IQIEN	ENTRIGES OF PEMIDAUNE	PINES, ING.			Linescone na dribe hade mais anne mais ma	in CipA
Principal Place	e of Business	Mailing Address				'(  <b>                                    </b>
PEMBROKE LAKES MALL, SPACE NO. 678 PEMBROKE LAKES MALL, SPACE NO. 678			79			
11401 PINES BOULEVARD 11401 PINES BOULEVARD		THOE NO. C		1		
PEMBROKE PIN	IE\$ FL 33026	PEMBROKE PINES FL 33026			DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified 06/08/1995	
2. Principal P	lace of Business	2a. Mailing Address			4. FEt Number	Applied For
21		26			65-0585524	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc			5. Gerificate of Status Deserred	\$8.75 Additional
22	27			5. Cartifactor States Desired	Fee Required	
City & Stat	e	City & State			6. Hestion Campa jo Financing	\$5.00 May Be
23 28		<b>28</b>	Country		Trust Fund Contribution	Added to Fees
Zip 24	Country	the second secon	30		8. This corporation owers the current year to Personal Property Lax	Intangible [TYes <b>XN</b> o ]
24]	9. Name and Address of Current		,		10. Name and Address of New Registere	7 1
			81	Name		
	LEN, TIMOTHY L		82	Street Addin	ress (P.O. Box Number is Not Acceptable)	
	Clematis street e 200				, , ,	7
	T PALM BEACH FL 33401		83			İ
****	TALM BEACHTE GOTO		84	City	_	85 Zip Code
44 5	607.0500	The contactor file as called			FI	L
office or re	egistered agent or both, in the State of	f Florida. Such change was auf	horized by	the corporation	ioration submits this statement for the purpose o on's teach of directors. I here by accept the app	ocatment as registered
	m familiar with, and accept the obligati	ons of, Section 607.0505, Flore	ta Statutes			ļ
SIGNATURE	Signature, typod or printed name of registers Fage-1	and little if applicable (NOTE F	te potentia (Ageli	terpolarie (n. 1	fwto so resignation (PAM)	İ
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DST	[   DELETE	1.1 THE			[   Change   [   Additor
NAME	TIBBETTS, KATHERYN E		12 NAMC		2000028 <b>4</b> 2	22973
STREET ADDRESS	10336 178TH COURT SOUTH BOCA RATON FL 33498		13 STREET ACORESS		700002842 -04/16/99 <sub>11</sub>	-01078005
CITY-ST-ZIP TITLE	DP	[   DELETE	14 COY 51-26 21 TULE		****150.00	),*****150 <b>,</b> 00。。
NAME	TIBBETTS, DAVID W	• • • •	2.2 NAME			
STREET ADDRESS	10336 178TH COURT SOUTH		23 \$TREET	ADDRESS.		
CITY-ST-ZIP	BOCA RATON FL 33498		2 4 CiTY-S	F 21+		
TITLE		[ ] DELETE	3.1 TOLF			[  Change   [  Adaton
NAME			3.7 NAME			
STREET ADDRESS			335!REET	ADDRESS		-
CITY-ST-ZIP		- Cleden	3.4 CHY-S	I ZiP		C. I. Charles C. I. Address
TITLE		[]] DELETE	4 1 TITLE			[   Change   [ 1 Add ton
NAME etnera abonese			4.2 NAME 4.3 STREET	Africa de		
STREET ADDRESS CITY-ST-ZIP			4.3.818.1.1 4.4.011.81			
TITLE		[   DELETE	5111KF	1."		[ Change    Addition
NAME		-	5.2 NAME	1		
STREET ADDRESS			53\$1REET	ADDRESS		İ
City-ST-ZIP			5.4 CITY-ST	201		
TITLE		[   DELFTE	6 1 THEF			[  Change
NAME			6.2 NAME		2 1.1 , 200	12)
STREET ADDRESS			638"RFF1	ADDRESS,	3 W/12/96 99F	$\mathcal{H}$ /

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(30). Floods Statutes. If before 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 coath; that I am an officer or director of the corporation or the receiver or trusted 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, with all other like empowered.

SIGNATURE:

1 Horkeron, Atty in Just 4-6-99 561-995-0064

## T&T Enterprises of Pembroke Pines Inc

Yes, I wish to participate in the Guaranteed Corporation Annual Report Program.

Or

 $\{\ \ \}$  No, I do not wish to participate and I will assume responsibility for the timely filing and payment of this annual report.

Special Power of Attorney

I, HAVID W TIBBETTS, President of T&T Enterprises of Pembroke Pines Inc, hereby grant to my Agent, Victor Lerro of Victor Lerro & Company PA the right to prepare and sign in Block 14 of the signature area the Florida Department of State Profit Corporation Annual Report on behalf of T&T Enterprises of Pembroke Pines Inc.. This Power of Attorney shall become effective immediately, and shall continue until revoked by me in writing.

Signature

DAVIN W TIBBETTS

Printed name

President

Date