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 # P95000078728 (9)

THREE TIMES AROUND, INC.

FILED Feb 23 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							, , , , , , , , , , , , , , , , , , , ,	
8421 FORES	8421 FOREST	FOREST HILLS DRIVE						
UNIT 106		UNIT 106				DO NOT WRITE IN THIS SPACE		
CORAL SPR	INGS FL 33065	CORAL SPRIN						
						3. Date Incorporated or Qualified	1	
Dringing Di	ace of Business	2a. Mailing Addr				10/10/1995 4. FEI Number Applie	-15	
	ace or business	F	055		,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	pplicable	
Suite, Apt. 6	# ole	Suite, Apt #,	etc			00 0024001 \$0.75 and		
22		27	- 1			5. Certificate of Status Desired Fee Regul		
City & State		Cily & State				·		
23	,	28				8. Election Campaign Financing \$5.00 Ma Trust Fund Contribution ☐ Added to F		
Zip	Country	7(p)	Cou	intry	,	This corporation owes or has paid the current year Intang		
24	25 29 30		•		Personal Property Tax due June 30. Yes			
	g. Name and Address of Curre		1001	1		10. Name and Address of New Registered Agent		
Al	NDREWS, TINA			81	Name			
	121 FOREST HILLS DRIVE				Di	diam'r (D.O. D. M. School: No. A. Sc		
			82 Street Ad		Street Ad	ddress (P.O. Box Number is Not Acceptable)		
	NIT 106 Oral Springs FL 33065			83				
U	UHAL SPHINGS FL 33005			Ш				
				84	City	El 85 Zip Coc	de	
44 Durauant I	a the gravianous of England CO7 Of	02 cmd 607 4609 Eloria	do Etatutas, the s	hour	a named oc	orporation submits this statement for the purpose of changing its re	nietorod	
office or re	egistered agent, or both, in the State	e of Florida. Such chan	ge was authorize	d by	the corpor	orporation submits this statement for the purpose of changing its re ration's board of directors. I hereby accept the appointment as reg	istered	
agent. I ar	n lamiliar with, and accept the oblig	jations of, Section 607.	0505, Florida Sta	tutes	š.			
SIGNATURE	Signature, byped or pointed name of required set is		Christ, Fluviolare		ol e anaturo ser	quired when rainstating) DATE		
12.		ND DIRECTORS	13.	и Аре	ill eignatus rac	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12	
TITLE	D	DE		ITI É			Addition	
NAME	ANDREWS, TINA		1.2 N					
STREET ADDRESS	8421 FOREST HILLS DRIVE	E #100			ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 3306				ST-ZIP		[;	
TITLE	COUNT OLUMOS LE 2000	□ DI			1-Zir	Change C	Addition	
NAME			2.2 N			La orange		
1					ADDRESS	·		
STREET ADDRESS					- 1	·		
CITY - ST - ZIP		□ DE			ST-ZIP	Change	Addition	
TITLE		U.	3.1 I			Et cuanda E	_ ~~~ioi	
NAME OTOTES ADDRESS					ADDOCCO		ļ	
STREET ADDRESS					ADDRESS		Ì	
CITY-ST-ZIP		DE			ST-ZIP	Change	Addition	
TITLE		L. Ut				Crange	_ WOOOOO	
NAME			4.21				Ī	
STREET ADDRESS					ADDRESS			
CITY-SI-ZIP		T DE		ITY - S	T-ZIP	Change	Addition	
TITLE		i Dt				∟ Change ∟	_ www.ica	
NAME			5.2 N				1	
STREET ADDRESS				-	ADDRESS			
CITY-ST-ZIP					T-ZIP	T 8	Addition	
TITLE		☐ DE				L_I Change [Addition	
NAME			6.2 N	AME				
STREET ADDRESS			6.3 S	TREET	ADDRESS		1	
CITY-ST-ZIP					IT-ZIP			
14 I horoby c	ertify that the information sympled i	with this films does not	augity for the av	omn	tion stated	in Section 119 07(3)(i) Florida Statutes I further certify that the Infe	ormetion	

res not quality for the exemption stated in section 119.07(3)(1), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address. indicated on this annual report or supplemental annual repo officer or director of the corporation for the receiver or trust Block 12 or Block 13 if changed, of on an attachment with a

4890