

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90123 043 \*\*\*150.00

DOCUMENT # P95000086946

1. Corporation Name  
TIJD, INC.

Principal Place of Business  
2020 SE 18TH ST  
POMPANO BEACH FL 33062-7624

Mailing Address  
2020 SE 18TH ST  
POMPANO BEACH FL 33062-7624



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1995

4. FEI Number

65-0626678

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. TIJD, Inc.

26.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. 2327 Snug Harbor Drive

27. 2327 Snug Harbor Drive

City & State

City & State

23. Palm Beach Gardens

28. Palm Beach Gardens

Zip

Zip

24. FL

29. FL

Country

Country

25. 33410

30. 33410

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAULL, JEFFREY  
2020 SE 18TH ST  
POMPANO BEACH FL 33062-7624

81. Name SAULL, JEFFREY  
82. Street Address (P.O. Box Number is Not Acceptable)  
2327 Snug Harbor Drive  
83. Palm Beach Gardens  
84. City Florida

FL 85. Zip Code 33410

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 of 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME SAULL, JEFFREY  
STREET ADDRESS 2020 SE 18TH ST  
CITY-ST-ZIP POMPANO BEACH FL 33062-7624

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 2327 Snug Harbor Drive  
1.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE D ☐ DELETE  
NAME LASTER, TERRY  
STREET ADDRESS 13 COPPERFIELD  
CITY-ST-ZIP BENTONVILLE AR 72712

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME ADAMS, RICHARD W  
STREET ADDRESS 5401 SE 33RD ST  
CITY-ST-ZIP EDMOND OK 73013

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-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, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/99 (561)630-6169

CR2E034 (11/98)

0329640