

08171999-90001-021-\$158.75-\$158.75

AMOUNT DUE ON OR BEFORE 09/18/99: \$500 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000000432 1. Corporation Name THE TIMBERLAKE GROUP ASSOCIATES INC.			
Principal Place of Business 5050 N.W. 74TH AVE. MIAMI FL 33166		Mailing Address 5050 N.W. 74TH AVE. MIAMI FL 33166	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
9. Name and Address of Current Registered Agent SUAREZ, RACHEL -1710-BAY DRIVE-- -MIAMI BEACH FL-33144		10. Name and Address of New Registered Agent 01 Name SUAREZ, RACHEL 02 Street Address (P.O. Box Number is Not Acceptable) 03 5050 N.W. 74th. AVENUE. 04 City MIAMI FL Zip Code 33166	
11. Pursuant to the provisions of sections 607.0507 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 RACHEL SUAREZ DATE 7/28/99 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS TITLE PSTD ☐ DELETE NAME SUAREZ, RACHEL - STREET ADDRESS -1710-BAY DR CITY-STATE-ZIP -MIAMI BEACH FL-33144		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE PSTD ☒ Change ☐ Addition 1.2 NAME SUAREZ, RACHEL 1.3 STREET ADDRESS 5050 N.W. 74th. AVE., 1.4 CITY-STATE-ZIP MIAMI, FL. 33166.	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-STATE-ZIP		2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-STATE-ZIP		3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-STATE-ZIP		4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-STATE-ZIP		5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-STATE-ZIP		6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-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 in an attachment with an address.			
SIGNATURE: SUAREZ, RACHEL SUAREZ		7/28/99 (305) 593-1141	

 FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/02/1996	
4. FEI Number 65-0632367	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. ☐ Yes ☐ No	

CR2E034 (5/99)



**The
Timberlake Group, Inc.**

July 29th. 1999.

To Whom It May Concern,
Division of Corporations,
Annual Reports Filings,
P.O. Box 1500,
Tallahassee, Florida 32302-1500.

Re: THE TIMBERLAKE GROUP ASSOCIATES INC.
DOCUMENT #P96000000432

Dear Sir,

With reference to my conversation with your office, and due to the fact that we did not receive the Corporation Annual Report Form at the beginning of the year, please find enclosed check for \$158.75 as full payment for the year 1999.

Thanking you for your cooperation,

Sincerely,

RACHEL SUAREZ
