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

CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 13 1998 8:00am Secretary of State

DOCU 1. Corporation	MENT # P9600	00019	500 (3	3)							
T.FAL	CON ENTERPRISES, INC.						11000	io de la compaño de la comp La compaño de la compaño d	liki denin denek i	JAJO KAJAK DIKU 1	Mana edir dedi
Principal Plac		~	Mailing Address				}				
	ITH AVENUE BEACH FL 33062	1521 SE 24TH AVENUE POMPANO BEACH FL 33062									
FOMFARO	OCAON PE 33002	POMPANO BENOTIFE 33002				DO NOT WRITE IN THIS SPACE					
							1	rporated or Qualifie	d		
					•		02/29				
	Place of Business	2a. Mailing Address					4. FEI Numb	=:			plied For
Suite, Apt.	# alo	26	Suite, Apt. #, etc.					664418			t Applicable
22	w, etc.	—	27				5. Certificate	of Status Desired		\$8.75 A	
City & Stat	te .		City & State				6 Flection C	ampaign Financing		\$5.00	·
23		28						d Contribution		Added I	
Zip	Country	Zφ		_	ıntry		8. This corpo	oration owes or has	paid the cur	rent year Int	angible
24	25	29		30				Property Tax due Ju			No
9, Name and Address of Current Registered Agent							10. Name and	d Address of New	Registered	Agent	
	JAYI, ABBEY				81 Na	me	ノンタング	, N BB∈	Υ		
	M31 NW 33RD COURT				82 Str	eet Addr	ess (P.O. Box Nu	ımber is Not Accep	table)		
L	AUDERDALE LAKES FL 33309				83 1	~ ^ ·		D 11 14.0			
					1	29	1 7.E.	TH ME	WUK	<u>~</u>	
					84 Cit	$^{\lambda}$ ϕ^{o}	OLARAM	REACH	FL	85 Zip (20de C2
11. Pursuant	to the provisions of Sections 607.050	2 and 607.15	08, Florida Statu	tes, the a	bove-nar	med corp	poration submits t	this statement for th	e purpose o	f changing it	s registered
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Su ations of, Sec	ich change was fion 607.0505, Fl	authorize Iorida Sta	d by the lutes.	corporat	tion's board of dir	rectors. I hereby ac	cept the app	ointment as	registered
SIGNATURE	, -										
	Signature, typed or printed name of registered ag				d Ageni sign	nature requir	red when reinstating)	10.111.250.70.6	DATE	- DIRECTOR	20.111.10
12.	OFFICERS AN	DIRECTOR	DELETE	13.	TI E		ADDITIONS	S/CHANGES TO OF	FICEHS AND	Change	Addition
NAME	NOONAN, TIMOTHY P		- Deter	12 N		1				Ongrigo	
STREET ADDRESS	1521 SE 24TH AVENUE				TREET AODRI	FSS					
CITY-ST-ZIP	POMPANO BEACH FL 3306	32			ITY-ST-ZIP						
TITLE	VD		DELETE	_	TLE V	P A:	TAYT.	ABBEY . 24 AV1 . BEA-CH		Change	Addition
NAME	AJAYI, ABBEY			2.2 N	AME	16	SALISC	. 2 L AV	ENUE	<u>^</u>	İ
STREET ADDRESS	3431 NW 33RD COURT			2.3 S	TREET ADDRI	ESS 0		ReacH	. . .		
CITY-ST-ZIP	LAUDERDALE LAKES FL 33	3309			ITY-ST-ZIP	V	OWN	<u>Gen en</u>	<u> </u>		
TITLE			DELETE	3.1 T	-	1				☐ Change	☐ Addition
NAME				3.2 N		}					}
STREET ADDRESS					treet addr						Ì
CITY-ST-ZIP			DELETE	3.4. C	ITY-ST-ZIP	' 				Change	Addition
TITLE NAME			bettit	4.21		1				Origingo	Addition
STREET ADDRESS					iame Treet addri	FSS					ľ
CITY-ST-ZIP					ITY-ST-ZIP	-~					
TITLE			DELETE	5.1 T		 				Change	Addition
NAME				5.2 N							
STREET ADDRESS					TREET ADDRI	ESS					
CITY-ST-ZIP				5.4 C	ITY-ST-ZIP						
TITLE			DELETE	6.1 TI	TLE					Change	Addition
NAME				6.2 N	AME						
STREET ADDRESS				638	FREET ADDRI	ESS					
CITY-ST-ZIP		70 - 100 - 27	72 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		TY-ST-ZIP		D. 140 657	Na et 12 ou c	- 1.6	usis . Al Al.	
 14. Thereby 6 	certify that the information supplied w	ain this filino c	toes not qualify t	or the ex	emption s	stated in	Section 119.07(3	uu, Horida Statute:	s, i further ce	intity that the	information I

Indicated on this annual report or supplied with riss fining does not quality for the exemption stated in section 1.19.07(3)(f), hinds statutes. Further centry into the formation indicated on this annual report or supplied with riss fining does not quality for the exemption stated in section 1.19.07(3)(f), hinds statutes. Further centry into the formation is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the conversion 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 charged, or only attachment with an address.

SIGNATURE:

185-2560