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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000021881 (3)

TAT &	NGA, INCORPORATED		,				
Principal Place of Business Mailing Address				I TOOKINDE IED KOITUU OKITE OOKIE OOKIE OOKIE OOKIE OOKIE EERO	() 1801 ROOT		
112 W. MITCHELL HAMMOCK RD. 112 W. MITCHELL HAMMO 110			MMOCK RD.				
			annova no.		DO NOT MORE IN THE OPACE		
OVIEDO FL 32765		OVIEDO FL 32765			DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualified		
9 Dringing D	loo of Business	2a. Mailing Address			03/07/1996 4. FEI Number Apr	whise For	
2. Principal Place of Business		26 Address				plied For Applicable	
Suite, Apt #, etc		Suite, Apt #, etc.			- \$8.75 A		
22		27			5. Certificate of Status Desired Fee Rec		
City & State		City & State			Election Campaign Financing \$5.00	May Be	
23		28			Trust Fund Contribution Added to		
Zip Country		Z(r) Country		ý .	8. This corporation owes or has paid the current year Intangible		
24	25 29 30		30	, 	Personal Property Tax due June 30. 🔲 Yes 🔣 No		
	g. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
TA'	T, TICH TO		81	Name	9		
	2 W. MITCHELL HAMMOCK RD.,	# 110	82	Street	t Address (P.O. Box Number is Not Acceptable)		
OV	NEDO FL 32765		0.7				
			. 83				
			84	City	FL 85 Zip C	ode	
CIONIATURE	Signature types or britted bases of equipmenta per-	Tid condition if applicable (N DRECTORS	Florida Statute H To 76 Kiti Registered Ag 13.	S. T. P.C. ent signature	proration's board of directors. I hereby accept the appointment as recovered the second of directors. I hereby accept the appointment as recovered the second of the secon	S IN 12	
TITLE	P	□ DELETE	1.1 TITLE		P	Addition	
NAME	TO TAT, TICH		1.2 NAME		TAT, TICH TO A MARKE STANCE.		
STREET ADDRESS	2401 BARLEY CLUB COURT		1.3 STREET ADDRESS			ro	
CITY-ST-ZIP	ORLANDO FL 32837		1.4 CITY-	ST-ZIP	ONEDO, FL 32765		
TOTLE		DELETE	2.1 TITLE		Change	Addition	
NAME			2.2 NAME				
STREET ADDRESS				ADDRESS .	; }		
CITY-ST-ZIP TITLE		DELETE	2 4 CITY- 3 1 TITLE	ST-ZIP	Change	Addition	
NAME		וייייייייייייייייייייייייייייייייייייי	3.2 NAME		L_I craitge		
STREET ADDRESS				r address	·		
CITY-ST-ZIP			3.4. CITY -	-			
TITLE		DELETE	3.4. GITY - 4.1 TITLE	31-71L	Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS				r address	: 1		
CITY-S1-ZIP			4.4 CITY-S1-ZIP				
TITLE			5.1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY+ST-ZIP			5 4 CITY-	ST-ZIP			
TITLE		DELETE	6 1 TITLE		Change	Addition	
NAME			62 NAME				
STREET ADDRESS			63 STREE	ADDRESS			
					1		

14. Thereby certify that the information supplied with this filling 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

SIGNATURE: