## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P96000027153 (1)

FILED 97 SEP 15 PH 10: 29

SECRETARY OF STATE

TODD ONE INC.							ALLAHASSEE, FLORIDA	
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		·						
Principal Place of Business Mailing Address								. 1001100 110 16116 61111 68111 00111 68116 11611 1801 180
618 NORTH PINE HILLS ROAD 618 NORTH PINE HILLS RO								
ORLANDO FL 32808 ORLANDO FL 32808								DO NOT WRITE IN THIS SPACE
ĺ								3. Date Incorporated or Qualified 3a. Date of Last Report
								03/22/1996
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For S9 - 33 69400 Not Applicable
21				26]				
Suite, Apt #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Re
23			28	t				Trust Fund Contribution Added to Fees
Zip	ip Country			7ip Cou		untry		8. This corporation owes or has paid the current year Intangible
24			29	30		<del>,,</del>		Personal Property Tax due June 30. Yes No
		and Address of Curre	nt Regis	lered Agent				10. Name and Address of New Registered Agent
		ODDRICK G				81	Name	
	NORTH P				82	Street Add	Iress (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32808						83		70000022960671
ļ						"		-09/17/9701103003
						B4	City	****165.00 *****165a.00
11. Pursuant	to the provis	ions of Sections 607.05	02 and 6	07,1508, Florida Statut	les, the a	j above	e-named corr	poration 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	Signature, typed	or printed name of registried ag	ont and title	d applicable (NO)	ft : Rogistere	ed Age	ent signature requi	ired when reinstating) DATE
12.		OFFICERS AN	ND DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD			DELETE	1.1 1	IHTLE		☐ Change ☐ Addition
NAME				1.2 NAME				
STREET ADDRESS 618 NORTH PINE HILLS ROAL ORLANDO FL 32808			AU				ADDRESS	·
CITY-ST-ZIP	UHLANI	JU PL 32808		DELETE	2.1 T	CITY-S	T-ZIP	Change Addition
TITLE NAME				בן אוניני	1	NAME		C. Granda C. J. Voormon
STREET ADDRESS							ADDRESS	h
CITY-ST-ZIP						CITY-S	J	
TITLE				DELETE	3.1 T		31-21/	Change Addition
NAME				•		MAME		
STREET ADDRESS					3.3 9	STREET	ADDRESS	
CITY-ST-ZIP					3.4.	CITY-5	ST-ZIP	
TITLE				DELETE	4.1 I	ITLE		Change Addition
NAME					4. 2	NAME		
STREET ADDRESS					4.3 9	STREET	ADDRESS	
CITY-\$1-ZIP				I no resid		CITY-S	T-ZIP	
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NAME						IAME		
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP TITLE	<del></del>			DELETE	5.4 C	CITY-S	1- ZIP	☐ Change ☐ Addition
NAME				C) precit		IAME	ļ	
STREET ADDRESS							ADDRESS	İ
CITY-\$T-ZIP						HTY-S		
	by certify that	it the information supplie	ed with th	nis filing does not quali				d 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 onth; 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: Lither a Charles

9.11.97