Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90104 031 \*\*\*150.00

## 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** 

## DOCUMENT # P9600060505

TANTS,	HALL HANDELS AGENTUR INC.							
Principal Place	e of Business	Mailing Address			,			
6162 SUDBURY AVENUE JACKSONVILLE FL 32210  G162 SUDBURY AVENUE JACKSONVILLE FL 32210					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			ł
					07/16/1996		į	į
2 Principal P	face of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	ĺ
¬ ·	iace of Desirioss	26			59-3397170	No	t Applicable	l
Suite, Apt.	#. etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		_	\$8.75	Additional	
22	.,,	27	27		5. Certifcate of Status Desired	Fee Re	quired	
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t		
23 Zip	Country	Zip	Country	Andrew Comments	* 8. This corporation owes the current year inta	ngible	<del> </del>	-
24	25	29 30	]		Personal Property Tax.	☐ Yes	<u>⊡</u> %₀	Į
	9. Name and Address of Curren				10. Name and Address of New Registered A	igent		
			81	Name				
HALL, MARGARETH			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			1
6162 SUDBURY AVENUE								
JACI	KSONVILLE FL 32210		83	i				İ
			84	City	FL.	85 Zip	Code	
office of r	egistered agent, or both, in the State in familiar with, and accept the obligation.	of Florida, Such change was author tions of, Section 607.0505, Florida	Statutes	the corporations.	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	tment as re	gistered	
- 13	Signature, typed or printed name of registered ager	ID DIRECTORS	13.	nt signature required	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTO	RS IN 12	
TITLE			1.1 TITLE			Change	☐ Addition	
NAME			1.2 NAME					:
STREET ADDRESS	6162 SUDBURY AVENUE		1.3 STREET ADDRESS					1
CITY-ST-ZIP	JACKSONVILLE FL 32210			ST-ZIP				[ ]
TITLE			2.1 TITLE			Change	☐ Addition	(
NAME			2.2 NAME				·	
STREET ADDRESS	ACCCE DEDICAL			TADDRESS				
CITY-ST-ZIP	KETTINGER STR. 113A GERMANY :		2.4 CITY-	ST-ZIP				
TITLE	☐ DELETE 3.		3.1 TITLE			Change	☐ Addition	
NAME			3.2 NAME					
STREET ADDRESS		<u>اید شامای درین ۱۰۰۰ کارستان کردندی ریاستانی</u>	3.3 STREE	TADDRESS	المائد ال			<u> </u>
CITY-ST-ZIP			3.4. CITY-					ļ
TITLE	DELETE		4.1 TITLE			Change	☐ Addition	ĺ
NAME	· ·		4.2 NAME	1				
STREET ADDRESS			4.3 STREE	TADDRESS				l
CITY-ST-ZIP				ST-ZIP		Change	☐ Addition	{
TITLE			5.1 TITLE 52 NAME			m change		
NAME	ļ <del>.</del> .		1	T ADDRESS	•			
STREET ADDRESS			5.4 CITY-S	1				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	-,		Change	Addition	1
TITLE	1							

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.

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: MARGARE

NAME

STREET ADDRESS

904-778-2328