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

PROFIT **CORPORATION** ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P97000043018

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90037 002 \*\*\*150.00



TAN EN	Enriges, INC.							
Principal Place	of Business	Mailing Address		_			## <b>###</b>	B) (1891 181 1881
WO DONDANVILLE RD #710 ST AUGUSTINE FL 32084		TWO DONDANVILLE RD #7:0 ST AUGUSTINE FL 32084				DO NOT WRITE IN THI	S SPACE	
JS		US				3. Date Incorporated or Qualifed 05/14/1997	: <u></u>	
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number 59-3452576	<b>├</b> ─- <b>├</b> -	Applied For Not Applicable
Suite, Apr. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional Reguired
City & State		City & State   28				6. Election Campaign Financing Trust Fund Contribution	\$5.0	O May Be
3  Zip	Country 25	Zip 29	Cou	ntry		8. This corporation owes the current year li Personal Property Tax.	ritangible	[]No
4	g. Name and Address of Current	<del></del>	301	_		10. Name and Address of New Registere	l Agent	
	g, Hame and Addissa of Content	giotoi da i igoni		81	Name			
	TER, C. SCOTT ESQ 3 LONGS LANDING ROAD EAST			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
	(SONVILLE FL 32225			83				
				84	City	F	<u> </u>	p Code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	: Florida: Such change was ยเ	ithorized	I DV 1	-named corp he corporation	oration submits this statement for the purpose a on's board of directors. I hereby accept the app	of changing in pintment as	its registered registered
SIGNATURE		MOTE:	Pagetored	Agent	signature regulate	d when reinstating) DATE		(
	Signature, typed or printed ha ne of registered agent OFFICERS ANI		13.	Agoni	aignatoro roquist	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TOFIS IN 12
TITLE	D	DELETE	11 TI	TLE			Change	
NAME	FORSBERG, D. KAY		1,2 NAME		)			1
STREET ADDRESS	7780 A1A SOUTH #107		1.3 ST	REET	ADDRESS			
CITY-ST-ZIP	ST AUGUSTINE FL 32086	J		TY-ST	J			
TITLE	VP	□ DELETE	2.1 TF				Change	e 🔲 Addition
NAME	BRAD DAILEY		2.2 NA	<b>ME</b>	l			1
STREET ADDRESS	TWO DONDANVILLE RD #710		2.3 ST	REET	ADDRESS			
CITY-ST-ZIP	ST AUGUSTINE FL 32084		2.4 C	ITY-S1	r-zip			
TITLE		☐ DELETE	3.1 TI	TLE			Chang	e 🗌 Addition
NAME			3.2 NA	ME	ļ			
STREET ADDR :SS			3.3 \$7	REET	ADDRESS			1
CITY-ST-ZIP		_	3.4. C	ITY-SI	r-ziP			
TITLE		☐ DELETE	4.1 TI	TLE			Chang	e 🗌 Addition
NAME			4. 2 N	AME	İ			
STREET ADDRESS			4 3 ST	REET	ADDRESS			1
CITY-ST-ZIP			4.4 CI	TY-ST	-ZIP			
TITLE		☐ DELETE	5.1 Tf	TLE			Chang	e
NAME			5.2 N	AME				
STREET ADDF ESS			5.3 \$1	TREET	ADDRESS			
CITY-ST-ZIP			5.4 CI	TY-ST	ZIP			
TITLE		☐ DELETE	6.1 TI	TLE			Chang	e
NAME			6.2 N	AME	}			1
STREET ADDRESS			6.3 ST	TREET	ADDRESS			

6.4 CITY-ST-ZIP 14. 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 office or of director of the corporation or the receiver or trustee empowered to execute this report as required by Charter 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.

SIGNATURE:

D. Kay Forsberg

904 6 20-87/0

CR2E034 (11/98)