PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCLIMENT

• •	E TOTAL MASSAGE, INC.	049122	,) (CELUGE) HIE MENT IRFIC CENT MONI CON ACTIVE	1878 1818) (1818	ilane néří hor
	·					
Principal Plac	e of Business	Mailing Address		a 49 bird die libiti 19 dit mette eitte gant gant gant g	1819 tätet (1918	61 ft ft ft ft ft ft
36 S. HOWAR	ID AVE.	936 S. HOWARD AVE.				
AMPA FL 336		TAMPA FL 33609		DO NOT WRITE IN THIS	CDACE	
			•	3 Date Incorporated or Qualifed	SPACE	
				06/02/1997		
2. Principal P	Place of Business	2a. Mailing Address		A FEI Number	Ap	plied For
		26		59-3453955	No	t Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			. \$8.75	
		27		G Certificate of Status Desired	Fae Re	oquired
City & Stat	te :	City & State		- 6. Election Campaign Financing	\$5.00	May Be
		28		Trust Fund Contribution	Added (o Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Inte		
]	25	29 3	0)	, d	☐ Yes	□No
	g. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered	Agent	
— 18721	TEJEFF Joe	Redner	81 Name			
	CUMURANT AND	A. Sala Mada a	82 Street Address (P.O. Box Number is Not Acceptable)			
	PAFL-33800	N. DALE MADR. A FLA 33607	7 83			
1720	TAMP	A PLADALAN	63			
	·	32601	84 City	Fi	85 Zip (Code
				FL		- Livered
agent: I a		ions of Section 607.0505, Florid	la Statutes.	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoin		
	Signature, typed or printed name of registered ager		agistered Agent signature require	ed when reinstailing) DATE		
2	Signature, typed or printed name of registered ager OFFICERS AN	D DIRECTORS	13.		D DIRECTO	RS IN 12_
2. TLE	Signature, tyled or printed name of registered ager OFFICERS AN		13. 1.1 TITLE	ed when reinstailing) DATE		
ſΓE	Signature, tyled or printed name of registered spar OFFICERS AN P WHITE, JEFF A	D DIRECTORS	13. 1.1 TITLE 12 NAME	ed when reinstailing) DATE	D DIRECTO	RS IN 12_
VE VE	Signature, tyled or printed name of registered ager OFFICERS AN P WHITE, JEFF A 4903 CROCKETT CT	D DIRECTORS	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS	ed when reinstailing) DATE	D DIRECTO	RS IN 12_
TLE ME REET ADORESS TY-ST-ZIP	Signature, tyled or printed name of registered ager OFFICERS AN P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33660	D DIRECTORS	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZP	ed when reinstailing) DATE	D DIRECTO	PRS IN 12
TLE WAE TREET ADORESS TTY-ST-ZIP TILE	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060	D DIRECTORS DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ed when reinstailing) DATE	D DIRECTO	RS IN 12_
TLE WAE TREET ADDRESS TTY-ST-ZIP TLE WAE	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060	D DIRECTORS DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME	ed when reinstailing) DATE	D DIRECTO	PRS IN 12Addition
TLE ME REET ADDRESS TY-ST-ZIP TLE WE TREET ADDRESS	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS .	ed when reinstaing) DATE	D DIRECTO	PRS IN 12
TLE WAE TREET ADDRESS TY-ST-ZIP TLE WAE TREET ADDRESS TY-ST-ZIP	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP	ed when reinstaing) DATE	D DIRECTO Change	PRS IN 12 Addition
ILE ME REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ed when reinstaing) DATE	D DIRECTO	PRS IN 12Addition
TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME	ed when reinstaing) DATE	D DIRECTO Change	PRS IN 12 Addition
LE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS REET ADDRESS	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3. STREET ADDRESS 3. STREET ADDRESS 3. STREET ADDRESS 3. STREET ADDRESS	ed when reinstaing) DATE	D DIRECTO Change	PRS IN 12 Addition
TE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP REET ADDRESS	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	ed when reinstaing) DATE	Change Change	Addition
TLE ME REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TREET ADDRESS	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ed when reinstaing) DATE	D DIRECTO Change	PRS IN 12 Addition
TLE WAE TY-ST-ZIP TLE WAE TREET ADDRESS TY-ST-ZIP TLE WAE TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TLE WAE	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ed when reinstaing) DATE	Change Change	Addition
THE WHE THEET ADDRESS TY-ST-ZIP THE WHE THEET ADDRESS TY-ST-ZIP THE WHE TREET ADDRESS TY-ST-ZIP THE WHE TREET ADDRESS TY-ST-ZIP THE WHE TREET ADDRESS	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ed when reinstaing) DATE	Change Change	Addition
THE WHE TREET ADDRESS TTY-ST-ZIP THE AME TREET ADDRESS TTY-ST-ZIP THE TREET ADDRESS TTY-ST-ZIP THE AME TREET ADDRESS TTY-ST-ZIP THE THE THE THE THE THE THE TH	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE Sey Hw / Delete Delete	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ed when reinstaing) DATE	Change Change	Addition
THE AME TREET ADDRESS TY-ST-ZIP THE AME TREET ADDRESS TY-ST-ZIP THE TREET ADDRESS TY-ST-ZIP THE THE TREET ADDRESS TY-ST-ZIP THE TREET ADDRESS TY-ST-ZIP THE TREET ADDRESS	P WHITE, JEFF A 4903 CROCKETT CT TAMPA FL 33060 DOT REDUCE 2 JOE 2040 N DALE MAR	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ed when reinstaing) DATE	Change Change	Addition
TILE AME IFICET ADDRESS ITY-ST-ZIP ITLE AME ITREET ADDRESS	PHINE, JEFF A' 4903 CROCKETT CT TAMPA FL 33060 REDNER JEE 2040 N DALE MAG TAMPA FL 330 FL 33	D DIRECTORS DELETE Sey Hw / Delete Delete	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME	ed when reinstaing) DATE	Change Change	Addition
THE WHE TREET ADDRESS TTY-ST-ZIP THE AME TREET ADDRESS TTY-ST-ZIP THE THE THE THE THE THE THE TH	PHINE, JEFF A' 4903 CROCKETT CT TAMPA FL 33060 REDNER JEE 2040 N DALE MAG TAMPA FL 330 FL 33	D DIRECTORS DELETE Sey Hw / Delete Delete	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 5.3 STREET ADDRESS	ed when reinstaing) DATE	Change Change	Addition
THE MAKE TITY-ST-ZIP THE AME TITY-ST-ZIP THE THE THE THE THE THE THE TH	PHINE, JEFF A' 4903 CROCKETT CT TAMPA FL 33060 REDNER JEE 2040 N DALE MAG TAMPA FL 330 FL 33	D DIRECTORS DELETE Sey Hw / Delete Delete	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME	ed when reinstaing) DATE	Change Change	Addition

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 emfuzil report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I em an officer or director of the corporation or the receiver of 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90023 049 ***158.75