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 # **P97000064732**

TIMELESS ELEGANCE HOME DESIGNS, INC.

Principal Place of Business

Mailing Address

FILED Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90006 035 ***150.00



251 MAITLAND AVENUE SUITE 201 ALTAMONTE SPRINGS FL 32701 251 MAITLAND AVENUE SUITE 201 ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701			701	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
					07/24/1997			
2. Principal P	lace of Business	2a. Mailing Address	. Mailing Address		4. FEI Number	F	Applied For	
21		26			59-3460501	1	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional	
22		27	~		5. Certificate of Status Desired	≕Fee⊧F	Required	
City & Stat	8 .	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees			
Zip Country Zip			Country		8. This corporation owes the current year Intangible			
24 29			30		Personal Property Tax. ☐ Yes ☐ No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent		
	DOLLIN BIOLOS		81	Name	•			
BRADSHAW, RICKY 251 MAITLAND AVENUE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
OLUMP GOA								
SUITE 201 ALTAMONTE SPRINGS FL 32701			83					
ALIA	AMONTE SPRINGS PL 32701		84	City			Code	
				_	corporation submits this statement for the purpose of cloration's board of directors. I hereby accept the appoint		1	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE								
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	BRADSHAW, RICKY		1.2 NAME					
STREET ADDRESS	2007 PIEDMONT PARK BLV.		1.3 STREE	TADDRE\$\$			Ì	
CITY-ST-ZIP	APOPKA FL 32703	i	1.4 CITY-S	T-ZIP	·			
TITLE		, DELETE	2.1 TITLE			Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS	•		2.3 STREET	TADORESS			1	
CITY-ST-ZIP			12:14 CITY+S	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	⊇	
NAME			3.2 NAME					
STREET ADORESS	And the state of t	•	3.3 STREET	TADORESS				
CITY-ST-ZIP		,	3.4. CITY-S			· .	1981	
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition	
NAME .			4. 2 NAME					
STREET ADDRESS		·	4.3 STREET	T ADDRESS				
CITY-ST-ZIP	•		4.4 CITY-\$					
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME:			5.2 NAME		"			
STREET ADDRESS	,		5.3 STREET	T ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-23P				
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME	Carried to the State of the Sta		6.2 NAME					
STREET ADDRESS		`	6.3 STREET	T ADDRESS				
	* *		I <u></u>			*		

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.