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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000078057 (1)

TEMPUS INTERNATIONAL ENTERPRISES, INC.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					4 444 444 444 444 444 444 444 444 444	
8762 LAKE TIBET CT 8762 LAKE TIBET CT ORLANDO FL 32836 ORLANDO FL 32836						
CHIDING P	L agoso	UNLANDU PL 3	ORLANDO FL 32836			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						09/08/1997
—	Place of Business	2a. Mailing Address				4. FE! Number Applied For
21		26				59-3468126 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22 City & Stat	10	27 City 6 Ctoto				Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
Zip Country					,	Trust Fund Contribution
24	25	29	30	J y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Curre		1901	Τ		10. Name and Address of New Registered Agent
KI	P&L SERVICES, INC.			81	Name	
390 N ORANGE AVE, STE 600				82	Stroot A	Address (P.O. Box Number is Not Acceptable)
	RLANDO FL 32801			02	Ollegt A	nucliess (i .o. box number is not Acceptable)
				83		
			•	84	City	85 Zip Code
44 Durewant	to the provinces of Sections 607 N	02 and 607 1509 Florid	o Clatutos the o		n nomed a	FL S Zp Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation 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 proded name of repotence agent and title d applicable. (NOTE: Registered Agent signature required when relastating) DATE						
12.		ID DIRECTORS	13.	o Age	ant algitation it	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DEL	.ETE 1.1 T	ITLE		Change Addition
NAME	Leventhal Runald 1. 8762 LAKETIBET	l _	1.2 N	AME		
STREET ADDRESS	8765 MKEDBET	cT	1.3 S	TREET	ADDRESS	
CITY-ST-ZIP	ORLANDO PL 3:	T83P	1.4 C	ITY-S	T-ZIP	
TITLE	S _	_ ☐ DEI	.ETE 2.1 TI	TLE		Change Addition
NAME	Leventhal , Jacavel		2.2 N	AME		
STREET ADDRESS	8762 LAKE TIBET	CT	2.3 S	PREE1	ADDRESS	
CITY-ST-ZIP	ORLANDOPL 3:			CITY-S	51 - ZIP	
TITLE		∐ DEt			ŀ	L_I Change L_I Addition
NAME OTOTET ADDRESS			3.2 No			
STREET ADDRESS	·				ADDRESS	
CITY-ST-ZIP		DIL		ITY-S	51 - ZIP	Change Addition
NAME		0	4.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				ITY-S	ľ	
TITLE		DEL				Change Addition
NAME			5.2 N/	AME		. —
STREET ADDRESS			5.3 ST	TREET	ADDRES\$	
CITY-ST-ZIP			5.4 CI	<u> TY - S</u> 1	T - ZIP	
TITLE		☐ DEL	ETE 6.1 TI	TLE		Change Addition
NAME			6.2 N/	AME		
STREET ADDRESS			6.3 \$1	TREET.	ADDRESS	
CITY-ST-ZIP			6.4 CI			
14. Thereby o	certify that the information supplied v	vith this filing does not a	ualify for the exe	lame	ion stated	d in Section 119.07(3)(i). Florida Statutes, I further certify that the information

Indicated on this annual report or suppliemental armost 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 charging, or on an attachment with an address.