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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P97000081949 (4)

I & D TODD ENTERPRISES INC

**FILED** Apr 07 1998 8:00am Secretary of State

	ENTERN MOLO, INC.				
Principal Place	e of Business	Mailing Address	<del></del>		TO THE PERIOD OF
2740 US1 SOUTH		2740 US1 SOUTH			
ST. AUGUSTINE FL 32086		ST. AUGUSTINE FL 32086			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 09/18/1997	
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		39-3470872	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zψ	Country	8. This corporation owes or has paid the co	urrent year Intangible
24	25	29	30	Personal Property Tax due June 30.	X Yes No
	9, Name and Address of Current	t Registered Agent		10. Name and Address of New Registered	l Agent
	EFFIELD, J. HOWARD		81 Name		
4209 BAYMEADOWS ROAD			82 Street Add	ress (P.O. Box Number is Not Acceptable)	<del></del>
SUITE 4			55	index (i.e. ben runner is not neceptable)	
JACKSONVILLE FL 32217			83		
			84 City	FI	85 Zip Code
44 Purcupat	to the createrain of Continue 607 000	2 and CO2 1009. Flands Stat	utos the should parad para		
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 Lai	m familiar with, and accept the obliga	itions of, Section 607.0505, f	Florida Statutes	• • • • • • • • • • • • • • • • • • • •	
SIGNATURE	5				
12.	Signature, typed or present ruencial registered ago: OFFICERS AND		OTE Bingistered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 13
TITLE	PSD	DOLLETE	1.1 TITLE	ADDITIONS/OFFAINGES TO OFFICENS AN	Change Addition
NAME	TODD, JOE LESLIE		1.2 NAME		
STREET ADDRESS	2740 US1 SOUTH		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST. AUGUSTINE FL 32086		1.4 City-ST-ZIP		
TITLE	VPD	DELETE	21 TITLE		Change Addition
NAME	TODD, DENA M	-	2.2 NAME		
STREET ADDRESS	2740 US1 SOUTH		2.3 STREET ADDRESS		
CITY-ST-ZIP	ST. AUGUSTINE FL 32086		2. 4 CITY - \$1 - ZIP		
TITLE		DOLLETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP			3.4 CITY-S1-ZIP		
TITLE		DOLLETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	5 4 CITY-S1-ZIP 6 1 TITLE		Change Addition
NAME			6 2 NAME		stange raction
STREET ADDRESS			6.3 STREET ADDRESS		
·					
CITY-ST-ZIP	CARL Shot the below to be a control as	di thur dibere dece pet emple	6.4 Crity-St-ZiP	Section 119 07/2)/i) Florida Statuton I further of	

indicated on this annual report of supplied with this thing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report of suppliemental 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 13 if changed, or on an attachment with an address.