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

**PROFIT CORPORATION** ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000082462 (7)

TPD ENTERPRISES, INC.

**FILED** Jun 23 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		
713 LAGOON DRIVE	713 LAGOON DRIVE		
OVIEDO FL 32765	OVIEDO FL 32765		
			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address		09/22/1997 4. FEI Number Applied For
21	26		59-3515296 Not Applicable
Suite, Apt. #, etc.	Suite, Apl. #, etc.		\$8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		Election Campaign Financing \$5.00 May Be
Zip • Country	Zip	Country	Trust Fund Contribution
24 25	29 30	¬ '	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	of Current Registered Agent	<u>'</u>	10, Name and Address of New Registered Agent
MOSS, WINSTON		81 Namo	
2341 WEKIVA RIDGE ROAD		82 Street	Address (P.O. Box Number is Not Acceptable)
APOPKA FL 32712		S. C. Cott	Acceptable)
		83	
		84 City	B5 Zip Code
11. Pursuant to the provisions of Sections	s 607 0502 and 607 1508 Florida Statutos	the above named	FL Sorroyation or homite this statement for the purpose of the size in the series of the ser
office or registered agent, or both, in	the State of Horida, Such change was auth the obligations of, Section 607,0505, Horida	orized by the cor	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
		а отщиев.	14/24/98
SIGNATURE Signature typed or protest name of n	sk contaged and the dappinase (NOTE file	gistered Agent signature	a required when reinstating)
	CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PRESIDENT	☐ DELETE	1.1 TITLE	☐ Change 🗖 Addition
NAME PEARLZNG	MEADE	1.2 NAME	
STREET ADDRESS 7/3 LAGOO	ON DR	13 STREET ADDRESS	· [
TITLE OVIGOO, F	DELLTE	1.4 CITY - ST - ZIP 2.1 TITLE	Car Oction V
NAME		2 1 111LF	SECRETARY CHANGE MAddition C TENNYSON MEADE 1310 PARK ANE
STREET ADDRESS		2.3 STREET ADDRESS	1310 PARK ANE
CITY-ST-ZIP			SANKORD FL 3277/
TITLE	DELETE	311IILE	TREASURCE Change MAddition
NAME		3.2 NAME	WINSTON ROSS
STREET ADDRESS		3.3 STREET ADDRESS	WINSTON ROSS 2341 WEKINA RIDGE RD APOPKA FL 327/2
CITY-S1-ZIP		3 4. CITY-ST-ZIP	APOPKA FL 327/2
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	i i	4. 2 NAME	
STREET ADDRESS		4.3 STREET ADORESS	
CITY-ST-ZIP	Floring	4.4 CITY-ST-ZIP	
TITLE	L) DELFTE	51 TIPLE	☐ Change ☐ Addition
STREET ADDRESS .		52 NAME	
CITY-ST-ZIP	į	5.3 STHEET ADDRESS	
THE	DEFFE	54 CHTY-ST-ZHP 61 THLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS	1	6.3 STREET ADDRESS	-06/24/98 01086038 <b>) 75</b>
CITY-ST-ZIP		6.4 CITY - ST - ZIP	***150.00 <b>v</b> .P
14 I hereby certify that the referension or	undered with the films door not another for the		ALC CONTRACTOR OF THE STATE OF

Thereby 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 min that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emprecing 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