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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000104894

1. Corporation Name

THODENIV ENTERDRICES INC

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90022 028 ***150.00

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Principal Place	of Rusiness	Mailing Address			4 (40)(88) (40 (6)) (40)() (42)() (43)(I MUTER ITALIA MAT	11 0 1001 (8130)	HOLDE BADE HODE
2632 WESTMINSTER TERRACE 263		2632 WESTMINSTER TERRA OVIEDO FL 32765	ACE			(!!0.0	D.A.G.E.	
•					DO NOT WRIT	E IN THIS S	PACE	
					3. Date Incorporated or Qualifed 12/09/1997			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number			olied For
21 26		26			<u>59-3480818</u>			Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A		
City & State	9	City & State			6. Election Campaign Financing		\$5.00 N	May Be
23		28			Trust Fund Contribution	LJ	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the curre	nt year Intan	gible	
24	25	—	30		Personal Property Tax.			□No
.44	9. Name and Address of Current			_	10. Name and Address of New Ro	egistered Ag	gent	
	. , , , , , , , , , , , , , , , , , , ,		81	Name				
TUPE	PENY, PETER J		L	<u> </u>				
	WESTMINSTER TERRACE		82	Street A	ddress (P.O. Box Number is Not Acceptal	ole))
~ ~	DO FL 32765		-					
OVIE	:DO FL 32/03		83	1				
			84	City			85 Zip C	ode
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office or re	egistered agent, or both, in the State (of Florida. Such change was a	uthorized by	the corpor	orporation submits this statement for the partion's board of directors. I hereby accept	the appoint	nanging its i ment as reg	registered pistered
agent. I ar	m familiar with, and accept the obligat	tions of, Section 607.0505, Flo	rida Statutes	3.				
agent. I ar	m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Statutes	3.		DATE		
agent. I ar	m familiar with, and accept the obligat	t and title if applicable. (NOTE	: Registered Age	3.	quired when reinstating)	DATE	DIRECTO	RS IN 12
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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 perfort or supplied that an any an 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 reference 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 or the affecting myth languagers, with all other like empowered.

SIGNATURE:

RIETON TIPPONY-has SIGNING OFFICER OR DIRECTOR