**PROFIT CORPORATION** ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000004335

## **FILED** Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90198 044 \*\*\*150.00

TNT PES	ST MANAGEMENT, INC.							
Principal Plac	e of Business	Mailing Address						
1682 NORTHWEST 97TH AVE 1682 NORTHWEST 97TH AVE CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071								
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071			" /	DO NOT WRITE IN THIS SPACE				
	· ·		. /	3. Date Incorporate	ed or Qualifed			
ı	•		0/2	01/13/1998				
2. Principal P	Tace of Business	2a. Mailing Address		4. FEI Number	61.0	<u> </u>	olled For	
21	. ·	28 P. O. BO	x 8875	65-08	08509	Not	Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Sta	tus Desired .	\$8.75 A		ļ
22	man to a second second	27	<u>`</u>			Fee Red		
City & Stat	le	City & State	SPRINGS	6. Election Campa		\$5.00 (	- ,	
23		28 - GORAL	<u> </u>			Added to	) F885	
Zip	Country	Zip 3307)	Country	8. This corporation	owes the current year in	itanguale ΔΩ Yes	□No I	
24	25		30 BROWA	10. Name and Add	ress of New Registered		<del></del>	
	9. Name and Address of Current	Kalistaian Whent	81 Name	10, 110				
TEN	ACE, DANIEL A							
	NORTHWEST 97TH AVE		82 Street	Address (P.O. Box Number	Is Not Acceptable)		- !	
	RAL SPRINGS FL 33071		83					١,
	100							•
		MC)	84 City		FI	85 Zip C	DOG	
44 Prestant	to the provisions of Sections 607.0502	end 607,1508, Florida Stat	tutes, the above-named	corporation submits this sta	tement for the numose o	f changing its	registered	
Affian AFF	registered agent or both, in the State of m familiar with, and accept the obligation	THOO DESCRIPTION OF THE PROPERTY	L PLUTNONZBO OV VIB LIDKU	oration's board of directors.	I hereby accept the appo	ointment as reg	estered	
agent.ia	im tairillar with are accept the congain	oris or, occurri occioco, i	ione our				1	
******								
SIGNATURE	Signature, typed of plinted name of registered agent	and title if applicable. (NC	TE: Registered Agent eignature		DATE			ĝ
SIGNATURE	OFFICERS AND	DIRECTORS	13.		DATE INGES TO OFFICERS A			4 68)
	OFFICERS AND		13. 1.1 TITLE			ND DIRECTO	RS IN 12	1-(11/0R)
12.	PRESIDENT	DIRECTORS DELETE	13. 1.1 TITLE 12 NAME					N34-(11 M9R)
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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 cartify that the information indicated on this annual report or 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 requires the 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 affectine of with an address, with all other like empowered.