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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90078 012 ***150.00

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DOCUMENT #	P98000045853
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1. Corporation Name

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TALEWINS, INC.

Principal Place of	of Business	Mailing Address		·				
4548 NO. FEDERA		4548 NO. FEDERAL HIGHWA	AY					,- • .
FT. LAUDERDALE	FL 33308	FT. LAUDERDALE FL 33308			DO NOT	WRITE IN THIS	SPACE	
					3. Date Incorporated or Qual	ifed		
					05/21/1998			
2. Principal Plac	ce of Business	2a. Mailing Address			4, FEI Number		App	lied For
21 14 CORA	L FISH LANE EAST	26 14 CORAL PISI	HLA	NE EAST	65-08398	72		Applicable
Suite, Apt. #,		Suite, Apt. #, etc.			5. Certificate of Status Desire	ed 🗆	\$8.75 A	
22		City & State			- Firsting Compiler Finance	in a	\$5.00	<u>'</u>
City & State 70 P1	-00 121	28 JUPITER	(3	,	6. Election Campaign Finance Trust Fund Contribution	ing	יו טט.כק Added to	
Zip Zip	Country	Zip		intry	This corporation owes the	current year Int		
24 3347	7 25	ا ما سما ا	30	•	Personal Property Tax.	,		√ No
24 55 1	9. Name and Address of Curren				10. Name and Address of N	ew Registered	Agent	
DICLUA	IC LADDY V			81 Name	SCILLA	SYNA	WITT	
	NS, LARRY V			82 Street Add	ess (P.O. Box Number is Not Ac	ceptable)		
1	4548 NO. FEDERAL HIGHWAY FT. LAUDERDALE FL 33308			83 /14	ORAL FISH LANK EAST			
11.64	IODENDALE I E 30000			63				
				84 City TV	PITER	FL	85 Zin C	97
l office or rec	the provisions of Sections 607.050 pistered agent, or both, in the State familiar with, and accept the obliga	of Florida. Such change was au	itnorized	bove-named corp I by the corporation utes.	oration submits this statement for on's board of directors. I hereby a	the purpose of accept the appoint	changing its r ntment as reg	egisteredistered
SIGNATURE	Finalture, typed or printed name of registered ager	t and title if any cable (NOTE)) S C Registered	Agent signature require	LOEN SYNNOTT	DATE	~~ <i>(</i>	_Z '\
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AN	ND DIRECTOR	RS IN 12
	D	☐ DELETE	1.1 TI	TLE			Change	☐ Addition
NAME	ALDEN SYNNOTT, PRISCILLA		1.2 N	AME				
	113 & 114 CORAL FISH LANE	EAST	1.3 S	TREET ADDRESS				
CITY-ST-ZIP	JUPITER FL 33477		1.4 C	TY-ST-ZIP			± T	
TITLE		☐ DELETE	2.1 1	TLE	•		☐ Change	☐ Addition
NAME			2.2 N	AME			•	ĺ
STREET ADDRESS		2.3 \$1		TREET ADDRESS				ļ
CITY-ST-ZIP		A AUGUS	_	ITY-ST-ZIP				- Address
TITLE		☐ DELETE	3.1 Ti	πE	•		Change	☐ Addition
NAME			3.2 N	AME				Į.
STREET ADDRESS			3.3 S	TREET ADDRESS				
CITY-ST-ZIP				TY-ST-ZIP			☐ Change	Addition
TITLE		☐ DELETE	4.1 T	TLE			∵ cuanĝe	

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 report or supplemental 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

CR2E034 (11/98),

Change

☐ Change

Addition

☐ Addition