**PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000052702

<ol> <li>Corporation</li> </ol>							
GLENN	MICHEAL TARDIFF INC.						
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	•					<b>i) i</b> i i i i i i i i i i i i i i i i i	
Principal Plac	e of Business	Mailing Ad	dress		( ABUINET III ABIBL PENIL BRITT BONG BONG	0, Ellis 1,31,1401. A	9119 1197 IZ-31
9767-B BOCA	GARDENS PARKWAY	9767-B BOO	A GARDENS PARK	WAY	·		
BOCA RATON FL 33496 BOCA RATON FL 33496					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	IS SPACE	
		1 - 14 (0) -	A-11		06/10/1998 4. FEI Number	LAnn	iled For
2. Principal F	Place of Business	<b>⊢</b> —	Address		65-0846328	<u> </u>	Applicable
21		26 Suito A	vpt. #, etc. *		<del></del>	\$8.75 A	
Sulte, Apt	, #, etc.		фт. #, екс.		5. Certificate of Status Desired	Fee Rec	
22		27 City 8	State		6. Election Campaign Financing	\$5.00	Vav Ba
City & Sta	110	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	<del></del>	Country	. 8. This corporation owes the current year I	ntangible	
24	25	29	30	}	Personal Property Tax.	☐ Yes _{	M No
ZA	9. Name and Address of Curre	<u></u>		<u> </u>	10. Name and Address of New Registere	d Agent	
				81 Name			1
TAR	ediff, glenn			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
9767-B BOCA GARDENS PARKWAY				02 30 det Au	diess (F.O. Dox Halling in 11017 dooplaste)		
BOCA RATON FL 33496				83			}
				84 City		. 85 Zip C	ode
				11.	F		
44 Pursuant	to the provisions of Sections 607.050	02 and 607 1508	Florida Statutes,	the above-named co	rporation submits this statement for the purpose	of changing its r	egistered
office or	registered agent, or both, in the State	of Florida. Such	change was authorida	orized by the corpora Statutes.	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	ontmenias reg	ISIO: BU
		3,015 01, 000001	Dies det	<i>f</i>	4/16	199	
SIGNATURE	Signature, typed or printed name of registration	ent and title if applicable	(NOTE Rec	ustered Agent signature requ	and when reinstating) DATE		
12.	Signature, typad or printed name of registrations OFFICERS AI	ND DIRECTORS		13.			
TITLE					ADDITIONS/CHANGES TO OFFICERS		RS IN 12
	Prosident 155		DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
NAME	GIENN M. Taidiff		DELETE		ADDITIONS/CHANGES TO OFFICERS		RS IN 12
NAME STREET ADDRESS	GIENN M. Taiditt	ous Phry	☐ DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
STREET ADDRESS	GIENN M. Taiditt	ous Phry	DELETE	1.1 TITLE 12 NAME	ADDITIONS/CHANGES TO OFFICERS	☐ Change	RS IN 12
	Prosident GIENN M. Taidiff 9767-Q BOCO GANDE BOCU RATEN FI 3.	ous Phry	☐ DELETE	1.1 TITLE 12 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS		RS IN 12 Addition Addition
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64 C/TY-ST-ZIP 14. 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 outh; 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 chapt like empowered.

6,3 STREET ADDRESS

STREET ADDRESS

**FILED** Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90258 010 \*\*\*150.00