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 Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90064 049 ***150.00

DOCUMENT #	P98000056329
1. Corporation Name	1 0000000020

T.B.F.T., INC.

Principal Plac	ce of Business	Mailing Address			1		***************************************	
752 PROSPERITY FARMS ROAD 752 PROSPERITY FARMS ROAD								
NORTH PALM	BEACH FL 33408	NORTH PALM BEACH FL 33	408			NT 1815175 IN THE	00405	
Į						OT WRITE IN THIS	SPACE	
}					3. Date Incorporated or C	Manier		
2 Principal E	Place of Business	2a. Mailing Address			06/22/1998 4. FEI Number			P. 15
21 TBF	TIMA	26 T. B. F. T.	INIA		65-084	1100		plied For
Suite, Apt.	# etc	26 T. B. F. T. Suite, Apt. #, etc. 27 P.O. BOX	, INC .		43-007	6140		t Applicable
22 1550	CYPNESS DRIVE	27 P.O. BOX 2	2956		5. Certifcate of Status De	sired 📋	\$8.75 / Fee Re	
-City & Stat	te-	City & State				***************************************		
23 JUD	its El	28 JUPITER	FL		6. Election Campaign Fin Trust Fund Contribution	- 11		May Be to Fees
Zip	Country	Zip	Country		8. This corporation owes			10 1 663
334	69 25 1/SA		io VS	A	Personal Property Tax.	•	⊠ Yes	No
	9. Name and Address of Current		,0,		10. Name and Address o			
			81	Name				
, DIEŁ	HL, THOMAS			IHU	DMAS DIEHL			
752	PROSPERITY FARMS ROAD		82	Street Addres	ss (P.O. Box Number is Not.	Acceptable)	74.	
NOF	RTH PALM BEACH FL 33408		83	_/(\sigma)0	W 100 LI 7	INDICI	<i>M</i>	
J	•							
			84	City Tild	DIRA	FL	85 Zip (Code
11 Pursuant	to the provisions of Sections 607.0502	and 607 1508. Florida Statutes	the above-				changing its	registered
Office or r	registered agent, or both, in the State of	f Florida. Such change was aut	horized by th	e corporation	's board of directors. I hereb	y accept the appoi	ntment as re	gistered
· ·	am familiar with and accept the obligation	ons of Septon 607.0505, Flore	ja Statutes.			1/11/1	20	·
SIGNATURE	Signature, typed or printed name of registered agent a	and title if anolicable (NOTE: 6	egistered Agent s	ignature required v	when reinstation)	7//6/9	<u>~7</u>	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	D			Change	Addition
NAME	DIEHL, THOMAS		1.2 NAME	ת ב	PHL, THOMAS			_
STREET ADDRESS)	1.3 STREET A	DDRESS /	EHL, THOMAS 2186 18849 N TVPITER, PL	ORFH		
CITY-ST-ZIP	NORTH PALM BEACH FL 33408		1.4 CITY-ST-2	71D	THOITED EL	32468	}	
TITLE		☐ DELETE	2.1 TITLE		· VI-11-15,1 C	00100	Change	☐ Addition
NAME			2.2 NAME					_
STREET ADDRESS			2.3 STREET A	DORESS				
CITY-ST-ZIP			2. 4 CITY-ST-					}
TITLE 7		DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME					_
STREET ADDRESS			3.3 STREET A	DORESS				
CITY-ST-ZIP			3.4. CITY-ST-					,
TITLE		☐ DELETE	4.1 TITLE	<u> </u>			☐ Change	Addition
NAME			4. 2 NAME			-		
STREET ADDRESS			4.3 STREET AL	nnpess				
CITY-ST-ZIP			4.4 CITY-ST-2		•			
TITLE		☐ DELETE	5.1 TITLE	<u>., , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	1		5.2 NAME	1	•			
STREET ADDRESS			5.3 STREET AL	ODRESS				
CITY-ST-ZIP			5.4 CITY-ST-Z					
TITLE		☐ DELETE	6.1 TITLE	-			☐ Change	Addition
NAME) ·	<u>_</u>	6.2 NAME	J				
STREET ADDRESS	Į			1				ĺ
			6.3 STREET AT	ODRESS I				ļ
CITY-ST-ZIP		•	6.3 STREET AL 6.4 CITY-ST-Z					

Increby 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 accuracy, with all other like empowered.

SIGNATURE:

561-575-4190 Davime Phone #