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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000066196 1. Corporation Name

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90162 039 ***150.00

TODAY'S LAND, INC.									
Principal Flace of Business	Mailing Address				_	1 1851551 115 15161 15111 88111 55111 88111	,,,,,		
C/O JOHN R. GEIGER. ESO. C/O JOHN R. GEIGER. ESO. 4475 US 1 SOUTH #406 4475 US 1 SOUTH #406						DO NOT IMPLIE IN THE	C CDACE		
ST AUGUSTINE FL 32086 ST AUGUSTINE FL 32086						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
						07/23/1998			
2. Principal Place of Business	2a. Mailing Address					4 FEI Number		Applied For	
						•		No: Applicable	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.7	5 Additional	
, ··············						5. Certifcate of Status Desired	Fee	Required	
22 27						6. Election Campaign Financing	\$5.0	00 May Be	
2328						Trust Fund Contribution		ed to Fees	
Zip Country	Zip	Country				8. This corporation owes the current year I	ntangible		
24 25	29	30				Personal Property Tax.	Yes	□No	
	9. Name and Address of Curren: Registered Agent			10. Name and Address of New I			d Agent		
OCIOCO DOUNTO			81	N	ame				
GEIGER, JOHN R			82	St	reet Add	dress (P.O. Box Number is Not Acceptable)			
44.75 US1 SOUTH #406		1	_						
ST AUGUSTINE FL 32086		i	83						
		-	84	Ci	ity	F	85 Z	ip Code	
11. Pursuant to the provisions of Sections 607.0502	1 007 4500 Flatta Otal	1 - 411		<u></u>		<u>-</u>	_ , , , , , , , ,	its registered	
office or registered agent, or both, in the State of	Florida, Such change was	Juthonzed	י עס	tne	corporat	tion's board of directors. I hereby accept the app	ointment as	registered	
agent. I am familiar with, and accept the obligat	ons of, Section 607.0505, FI	orida Statu	rtes.	•					
SIGNATUFE	MOT	- December	Åcont	t sion	etura recue	red when reinstating) DATE			
Signature, typed or printed name of registered agent OFFICERS ANI		13.	Agen	ıı sığı	atore redu	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS IN 12	
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicate on this annual report or supplemental annual report in true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the receiver or prustee empowered to execute this report as required by Chapter 807. 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:

SIGNATURE AND TYPEO OR P G OFFICER OR DIRECTOR