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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P98000078261

1. Corporation Name
TIMBRY TORACCO INC

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90083 009 ***150.00

HIVINI TODACCO, INC.						
Principal Place of Business	Mailing Address					91161 INET 1881
	681 8TH STREET, N.E.					
681 8TH STREET, N.E. 681 8TH STREET, N.E. NAPLES FL 34120 NAPLES FL 34120						
1807 EEG 1 E G412G				,DO NOT WRITE IN THI	SPACE	
				3. Date Incorporated or Qualifed 09/04/1998		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21 26 26				59-3529997		t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22	27			0. 00.0000	Fee Re	 -
City & State City & State				6. Election Campaign Financing	\$5.00	- 1
23	28			Trust Fund Contribution	Added 1	to Fees
Zip Country	Zip	Country	У	8. This corporation owes the current year la		
24 25		10		Personal Property Tax.	Yes	□No
9. Name and Address of Curre	ent Registered Agent	81	1 Name	10. Name and Address of New Registered	Agent	
WILLIS, TIM		*'	1 Name			
681 8TH STREET, N.E.		82	2 Street A	ddress (P.O. Box Number is Not Acceptable)		
NAPLES FL 34120						
NAPLES PL 34120		83	3			
		84	4 City		85 Zip (Code
				<u>FI</u>	<u> </u>	
11. Pursuant to the provisions of Sections 607.05	502 and 607.1508, Florida Statutes	s, the above	ve-named o	corporation submits this statement for the purpose oration's board of directors. I hereby accept the appropriate the property accept the appropriate the property of the prope	if changing its pintment as re	gistered
11. Pursuant to the provisions of Sections 607.03 office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obligations.	502 and 607.1508, Florida Statutes te of Florida. Such change was aut gations of, Section 607.0505, Florid	s, the above thorized by da Statute	ve-named o y the corpo s.	corporation submits this statement for the purpose or ration's board of directors. I hereby accept the appropriate the company of the purpose	of changing its cintment as re	gistered
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig	e of Florida. Such change was aut gations of, Section 607.0505, Florid	thorized by da Statute	y the corpo	ration's board of directors. I hereby accept the appr	of changing its pintment as re	gistered
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI	te of Florida. Such change was aut gations of, Section 607.0505, Florid gant and title if applicable. (NOTE: R	thorized by da Statute Registered Age	y the corpo	quired when reinstating) DATE	13 9	gistered 9
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATUR Signature, typed or printed hame of registered agent. 12. OFFICERS A	e of Florida. Such change was aut gations of, Section 607.0505, Florid Bent and title if applicable. (NOTE: R NND DIRECTORS	da Statute Registered Age	y the corpo	ration's board of directors. I hereby accept the appr	3 9 ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATUR Signature, typed or printed hains of registered agent. I am familiar with, and accept the oblig SIGNATUR. OFFICERS A	te of Florida. Such change was autigations of, Section 607,0505, Florid patients of the florid such and title if applicable. NOTE: RAND DIRECTORS	thorized by da Statute Registered Age 13. 1,1 TITLE	y the corpo	quired when reinstating) DATE	13 9	gistered 9
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATUR Signature, typed or printed hame of registered at 12. OFFICERS A TILE D V S 1 NAME T M ULL 15	te of Florida. Such change was autigations of, Section 607,0505, Florid patients of the florid such and title if applicable. NOTE: RAND DIRECTORS	thorized by da Statute Registered Age 13. 1.1 TITLE 1.2 NAME	y the corpo	quired when reinstating) DATE	3 9 ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered at 12. OFFICERS A TITLE D P P S T STREET ADDRESS GR 8 8 5 STREET A	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridation 607.0505, Floridat	norized by da Statute Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	y the corpo	quired when reinstating) DATE	3 9 ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SIGNATURE Signature, typed or printed harme of registered agent. I am OFFICERS AT THE NAME STREET ADDRESS 681 845 STREET ADDRESS 681 STREET ADDRESS	Tended a Such change was autgations of, Section 607,0505, Florid Control of Section 607,0505, Florid C	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	y the corpolis. ant signature references ET ADDRESS ST-ZIP	quired when reinstating) DATE	ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered at 12. OFFICERS A TITLE D P P S T STREET ADDRESS GR 8 8 5 STREET A	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridation 607.0505, Floridat	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	y the corpolis. ant signature re-	quired when reinstating) DATE	3 9 ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SIGNATURE Signature, typed or printed harme of registered agent. I am OFFICERS AT THE NAME STREET ADDRESS 681 845 STREET ADDRESS 681 STREET ADDRESS	Tended a Such change was autgations of, Section 607,0505, Florid Control of Section 607,0505, Florid C	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature received and signature received	quired when reinstating) DATE	ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SIGNATURE SIgnature, typed or printed hame of registered agent. I am OFFICERS AT TITLE NAME TITLE NAME TITLE VAPLES, FA. 3	Tended a Such change was autgations of, Section 607,0505, Florid Control of Section 607,0505, Florid C	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE	ent signature reservable. ET ADDRESS ST-ZIP ET ADDRESS	quired when reinstating) DATE	ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE Signature, typed or printed name of registered at 12. TITLE DF VF S T NAME STREET ADDRESS 681 8 th Street CITY-ST-ZIP WAPLES, FA. 3	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the floridation	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ert ADDRESS ST-ZIP	quired when reinstating) DATE	ND DIRECTO	PRS IN 12 Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SI	Tended a Such change was autgations of, Section 607,0505, Florid Control of Section 607,0505, Florid C	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE	ent signature reservables ET ADDRESS ST-ZIP	quired when reinstating) DATE	ND DIRECTO	PRS IN 12
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered at 12. OFFICERS AT 12. TITLE D VV S T NAME STREET ADDRESS 68 1 8 th Street NAME STREET ADDRESS 68 1 8 th Street NAME STREET ADDRESS CITY-ST-ZIP OF TITLE NAME STREET ADDRESS CITY-ST-ZIP	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the floridation	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ert ADDRESS ST-ZIP	quired when reinstating) DATE	ND DIRECTO	PRS IN 12 Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered at 12. OFFICERS A 12. TITLE D VV S T NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTY-ST-ZIP TITLE NAME STREET ADDRESS CTY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CTY-ST-ZIP TITLE	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the floridation	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.1 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.3 STREE 3.4 CITY- 3.5 STREE 3.6 STREE 3.7 STREE	et ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	quired when reinstating) DATE	ND DIRECTO	PRS IN 12 Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered at 12. OFFICERS A 12. TITLE D VV S T NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Floridati	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.2 NAME 3.3 STREE 3.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-	et ADDRESS ST-ZIP ET ADDRESS ST-ZIP ST-ZIP ST-ZIP ST-ZIP	quired when reinstating) DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. OFFICERS A TITLE DEPOSITION OFFICERS A TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRE	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of the floridation	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE	et ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	quired when reinstating) DATE	ND DIRECTO	PRS IN 12 Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. In the signature of the signa	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Floridati	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.3 NAME	et ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	quired when reinstating) DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. In the Signature, typed or p	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Floridati	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.3 STREE 4.4 STREE 4.5 NAME 4.5 STREE 4.5 NAME 4.5 STREE	et address	quired when reinstating) DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. A signature is signature, typed or printed name of registered agent. A signature, typed or printed name of	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridations of Section 607.0505, Floridation 607.05	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	et address et address et address et address st-zip et address st-zip et address st-zip et address st-zip	quired when reinstating) DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SIGNATURE Signature, typed or printed harme of registered agent. I am familiar with, and accept the oblig SIGNATURE 12. OFFICERS AT THE NAME STREET ADDRESS AS A STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Floridati	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREI 2.1 NAME 2.3 STREI 2.4 CITY- 3.1 TITLE 3.3 STREI 4.1 TITLE 4.2 NAME 4.3 STREI 4.2 NAME 4.3 STREI 4.1 TITLE 4.2 NAME 4.3 STREI 4.1 TITLE 5.1 TITLE 4.2 NAME 4.3 STREI 4.1 TITLE 4.2 NAME 4.3 STREI 4.1 TITLE 4.2 NAME 5.1 TITLE	et address et address et address et address st-zip et address et address et address et address st-zip et address st-zip	quired when reinstating) DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. A signature is signature, typed or printed name of registered agent. A signature, typed or printed name of	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridations of Section 607.0505, Floridation 607.05	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	et address et address et address st-zip et address et address st-zip et address st-zip et address st-zip	quired when reinstating) DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridations of Section 607.0505, Floridation 607.05	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE	et address st-zip	quired when reinstating) DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. In the signature, typed or p	le of Florida. Such change was autigations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Floridat	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 5.3 STREE 5.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.4 CITY- 5.3 STREE 5.4 CITY-	et address st-zip	quired when reinstating) DATE	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE SI	le of Florida. Such change was autgations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of Section 607.0505, Floridations of Section 607.0505, Floridation 607.05	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 4.2 NAME 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 5.2 NAME 6.1 TITLE 5.2 NAME 6.1 TITLE	et address st-zip	quired when reinstating) DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. I am familiar with, and accept the oblig SIGNATURI Signature, typed or printed name of registered agent. In the signature, typed or p	le of Florida. Such change was autigations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridation of Section 607.0505, Floridation 607.0505, Floridat	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.3 STREE 2.4 CITY- 3.1 TITLE 3.3 STREE 4.2 NAME 4.2 NAME 4.2 NAME 4.5 TITLE 5.2 NAME 5.3 STREE 6.1 TITLE 6.2 NAME 6.1 TITLE 6.2 NAME 6.1 TITLE 6.2 NAME	et address st-zip	quired when reinstating) DATE	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition

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: