PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000082592

1. Corporation Name

T & R ENTERPRISES, INC. OF NORTH FLORIDA

| Principal Place of Business | | | | | | | | |
|-----------------------------|--|--|--|--|--|--|--|--|
| 1139 N BAY DRIVE | | | | | | | | |

Mailing Address

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90075 013 ***150.00



| 1139 N BAY DRIVE 1139 N BAY DRIVE | | | | | | | | | | |
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| | | | | | <u></u> | DO NOT WRI | IE IN IHI | S SPACE_ | | |
| • | | | | | | 3. Date Incorporated or Qualifed 09/21/1998 | | | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | , . | . 4 | I. FEI Number | | X | Applied For | |
| 21 1901 | E. 17th Court | 26 1901 E. 17# | 7 N | ourt | | | | | Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | × | | Additional Required | |
| City & State | | City & State 28 Panama Cit- | _ | - 1 | | 3. Election Campaign Financing Trust Fund Contribution | | • | May Be d to Fees | |
| Zip 24 32 4 | U Country | | Country | sA | 1 | This corporation owes the curr Personal Property Tax. | ent year ir | ntangible □Yes | ⊠ No | |
| | 9. Name and Address of Current | Registered Agent | | | 1 | 0. Name and Address of New F | Registere | i Agent | | |
| | | | 81 | Name | Ric | hard Riaby | _ | | 1 | |
| RIGBY, RICHARD | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 1139 N BAY DRIVE | | | | | 1901 | E. 17# Con | / Ť | _ |] | |
| LYNI | N HAVEN FL 32444 | | 83 | | | | _ | | ļ | |
| | | | 84 | City | Pan | ama City | FI | | ip Code | |
| 11. Pursuant | to the provisions of Sections 607.0502 | and 607,1508, Florida Statutes, th | ne above | -named c | comorati | on submits this statement for the | purpose o | f changing | its registered | |
| office or re | egistered agent, or both, in the State of maniliar with, and accept the obligation | ' Florida. Such change was author | ized by i | tne corbor | oration's | board of directors. I hereby accep | t the app | ointment as | registered | |
| | m ramiliar with, and accept the obligation | als of Section 601.0303, Florida (| Jiaiuius. | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: Regis | tered Agent | l signature rec | equired whe | n reinstating) | DATE | | | |
| 12. | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OF | FICERS A | ND DIREC | TORS IN 12 | |
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| NAME | | 1 | 1.2 NAME | ′ | アナチ | finey Rigby + | | | l l | |
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| CITY-ST-ZIP | | 1 | 1.4 CITY-ST | r-ZIP | Pa | nama City, Fl | 3240 | <u>s </u> |) | |
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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: