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

DOCUMENT # P98000094778

TEAGUE INVESTMENTS, INC.

	•
Principal Place of Business	Mailing Address
100 STAGHORN LN	4100 STAGHORN LN
WESTON FL 33331	WESTON FL 33331

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90201 007 ***150.00



#100 STAGHORN LN 4100 STAGHORN LN WESTON FL 33331 WESTON FL 33331			DO NOT WRITE IN THI	IS SPACE
		•	3. Date Incorporated or Qualifed 11/06/1998	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	X Applied For
٠٠ · ·	26			Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		ountry -	This corporation owes the current year I Personal Property Tax.	ntangible ☐ Yes ☐ No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
TEAGUE, CONSUELA 4100 STAGHORN LN		81 Name 82 Street Addre	ess (P.O. Box Number is Not Acceptable)	i i
WESTON FL 33331		83		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

83

84 City

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition TITLE □ DELETE 1.1 TITLE TEAGUE, CONSUELA 1.2 NAME NAME 4100 STAGHORN LN 1.3 STREET ADDRESS STREET ADDRESS WESTON FL 33331 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 2.1 TITLE TEAGUE, GEORGE 2.2 NAME NAME 4100 STAGHORN LN 2.3 STREET ADDRESS STREET ADDRESS WESTON FL 33331 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE NAME 4, 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY+ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)

Zip Code