

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 # V73519

1. Corporation Name  
TBF GOLDENROD, INC.

Principal Place of Business

2221 LEE RD  
STE 24  
WINTER PARK FL 32789  
US

Mailing Address

2221 LEE RD  
STE 24  
WINTER PARK FL 32789  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

PRATT, JAMES R ESQ.  
GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS  
389 NORTH NEW YORK AVENUE, 3RD FLOOR  
WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/22/1992

4. FEI Number

59-3154292

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME SILVER, SHOEL  
STREET ADDRESS 2221 LEE RD, STE 24  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE DVS ☐ DELETE

NAME COOPER, BERNARD  
STREET ADDRESS 2221 LEE RD, STE 24  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE DVS ☐ DELETE

NAME LUBIN, LAWRENCE  
STREET ADDRESS 2221 LEE RD, STE 24  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE T ☐ DELETE

NAME LUBIN, LAWRENCE  
STREET ADDRESS 2221 LEE RD, STE 24  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE

22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE

32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE

62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAWRENCE LUBIN

JAN 27/99 (407) 645-6256

Daytime Phone #

CR2E034 (11/98)

0079638

FILED

99 FEB 11 PM 4:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

