

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION ANNUAL REPORT 1995**

**FLORIDA DEPARTMENT OF STATE**  
 Sandra D. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS



**DOCUMENT # 814236 (6)**

1. Corporation Name  
**TIF INSTRUMENTS, INC.**

Principal Place of Business Mailing Address

**9101 N W 7TH AVENUE MIAMI FL 33150**      **9101 N W 7TH AVENUE MIAMI FL 33150**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

**APPROVED AND FILED**

**55 APR 27 AM 7:32**

**SECRETARY OF STATE TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/22/1960** 3a. Date of Last Report **04/29/1994**

4. FEI Number **59-0966790** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

**GERARD, THOMAS H**  
**9101 N W 7TH AVE**  
**MIAMI FL 33150**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when rechartering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>SMITH, HARRY B</b>
STREET ADDRESS	<b>9101 N W 7TH AVE</b>
CITY - ST - ZIP	<b>MIAMI, FL 00000</b>
TITLE	<b>PD</b>
NAME	<b>GERARD, THOMAS H</b>
STREET ADDRESS	<b>9101 N W 7TH AVE</b>
CITY - ST - ZIP	<b>MIAMI, FL 00000</b>
TITLE	<b>S</b>
NAME	<b>GERARD, JAMES L (ASST)</b>
STREET ADDRESS	<b>9101 N W 7TH AVE</b>
CITY - ST - ZIP	<b>MIAMI, FL 00000</b>
TITLE	<b>D</b>
NAME	<b>GERARD, WILLIAM R</b>
STREET ADDRESS	<b>9101 N W 7TH AVE</b>
CITY - ST - ZIP	<b>MIAMI, FL 00000</b>
TITLE	<b>V</b>
NAME	<b>GERARD, ELLIOT</b>
STREET ADDRESS	<b>9101 N W 7TH AVE</b>
CITY - ST - ZIP	<b>MIAMI, FL 00000</b>
TITLE	<b>D</b>
NAME	<b>LIEBERMANN, LEONARD</b>
STREET ADDRESS	<b>9101 N W 7TH AVE</b>
CITY - ST - ZIP	<b>MIAMI, FL 00000</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>Delete</b>
4.3 STREET ADDRESS	<b>William Gerard</b>
4.4 CITY - ST - ZIP	<b>9101 N.W. 7th Avenue</b>
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Thomas Gerard \_\_\_\_\_

DATE: \_\_\_\_\_ SYSTEM PROVIDED BY: \_\_\_\_\_