

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F79312** (7)
1. Corporation Name
T.B.I., INC.



Principal Place of Business 4301 NW OAK CIRCLE SUITE 14 BOCA RATON FL 33431	Mailing Address 4301 NW OAK CIRCLE SUITE 14 BOCA RATON FL 33431
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 04/19/1982
24		29		4. FEI Number 59-2190679 Applied For ☐ Not Applicable
25		30		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
				7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**EISENBERG, JAMES L., ESQ.
ONE CLEARLAKE CENTER
250 AUSTRALIAN AVE S, SUITE 1300
WEST PALM BEACH FL 33401**

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	ALLAN, WILLIAM JAMES	1.2 NAME	
STREET ADDRESS	475 NE 38TH ST	1.3 STREET ADDRESS	PO Box 2294 N/A
CITY-ST-ZIP	BOCA RATON, FL 33431	1.4 CITY-ST-ZIP	Boca Raton, FL 33427-2294
TITLE	D ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	ZAWASKI, CATHY ANN	2.2 NAME	
STREET ADDRESS	475 NE 38TH ST	2.3 STREET ADDRESS	PO Box 2294 N/A
CITY-ST-ZIP	BOCA RATON, FL 33431	2.4 CITY-ST-ZIP	Boca Raton, FL 33427-2294
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 changed, or on an attachment with an address.

CR2E034 (10/97)