

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

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Matham
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 4:45
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **G79233** (4)
 1. Corporation Name
TECADO, INC.

Principal Place of Business: **C/O TERRY W. STILES, 6400 N. ANDREWS AVENUE, FORT LAUDERDALE FL 33309**
 Mailing Address: **C/O TERRY W. STILES, 6400 N. ANDREWS AVENUE, FORT LAUDERDALE FL 33309**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: **01/18/1984**
 3a. Date of Last Report: **04/29/1994**
 4. FCI Number: **59-2365519**
 Applied For: Applied For, Not Applicable
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Director Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 7. This corporation has liability for nonpayment of taxes under Chapter 218, Florida Statutes: Yes No

2. Principal Place of Business: [21] [22] [23] [24] [25]
 2a. Mailing Address: [26] [27] [28] [29] [30]

9. Name and Address of Current Registered Agent
**DUKE, BRYAN W
 C/O STILES CORPORATION
 6400 N. ANDREWS AVE
 FORT LAUDERDALE FL 33309**

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 of Registered Agent or Director) _____ (Signature of Corporation Representative)

12. OFFICERS AND DIRECTORS

1. TITLE	DPT
2. NAME	STILES, TERRY W
3. STREET ADDRESS	6400 N. ANDREWS AVE
4. CITY & STATE	FT. LAUDERDALE FL 33309
5. TITLE	DVS
6. NAME	HART-TWEETON, DONNA
7. STREET ADDRESS	1703 E LAS OLAS BLVD.
8. CITY & STATE	FT LAUDERDALE FL
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY & STATE	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY & STATE	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY & STATE	13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY & STATE	17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY & STATE

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 218.005(1)(b), Florida Statutes. I further certify that the information submitted on this report or supplementary annual report is true and accurate, and that my signature shall bear the same legal effect as if made under oath. I am an officer or director of the corporation or the person authorized by the corporation to execute this report as required by Chapter 218, Florida Statutes, and that my name appears in Block 1, or Block 13, of report or certificate filed with this report.

SIGNATURE: 
 SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Terry W. Stiles

305-776-9300