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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # R95626
1. Corporation Name
TINTER, INC.

Principal Place of Business: **13000 N.W. 45th Ave. Opa-Locka, FL 33054**
Mailing Address: **13000 N.W. 45th Ave. Opa-Locka, FL 33054**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 Suite, Apt. #, etc: 22 City & State: 23 Zip: 24 Country: 25

2a. Mailing Address: 26 Suite, Apt. #, etc: 27 City & State: 28 Zip: 29 Country: 30

3. Date Incorporated or Qualified: **JANUARY 23, 1986**

4. FEI Number: **59-2630284** 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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
**JAMES MARX, ESQ.
200 S. Biscayne Blvd.
Suite 1870
Miami, Florida 33131**

10. Name and Address of New Registered Agent
81 Name: **JAMES MARX, ESQ.**
82 Street Address (P.O. Box Number is Not Acceptable): **200 S. Biscayne Blvd.**
83 Suite: **Suite 1870**
84 City: **Miami** 85 Zip Code: **FL 33131**

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 duly qualified, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **JAMES MARX** (NOTE: Registered Agent signature required when re-registering) DATE: **4/13/98**

12. OFFICERS AND DIRECTORS

TITLE	C, D	<input type="checkbox"/> DELETE
NAME	Richard B. Wolf	
STREET ADDRESS	13000 N.W. 45th Avenue	
CITY-ST-ZIP	Opa-Locka, FL 33054	
TITLE	P, D	<input type="checkbox"/> DELETE
NAME	Mark Poplin	
STREET ADDRESS	13000 N.W. 45th Avenue	
CITY-ST-ZIP	Opa-Locka, FL 33054	
TITLE	VP, D	<input type="checkbox"/> DELETE
NAME	Lisa Poplin	
STREET ADDRESS	13000 N.W. 45th Avenue	
CITY-ST-ZIP	Opa-Locka, FL 33054	
TITLE	S, T, D	<input type="checkbox"/> DELETE
NAME	Jose Almirall	
STREET ADDRESS	13000 N.W. 45th Avenue	
CITY-ST-ZIP	Opa-Locka, FL 33054	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	900002488199--8
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 supplementary 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 checked, or on an attachment to an address.

SIGNATURE: *[Signature]* DATE: **4/13/98** 305/836-5826

CR2E034 (10/97)

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ACCOUNT NO. : 072100000032

REFERENCE : 780376 11513A

AUTHORIZATION :

Patricia Pizutto

COST LIMIT : \$ 158.75

ORDER DATE : April 14, 1998

ORDER TIME : 10:33 AM

ORDER NO. : 780376-015

CUSTOMER NO: 11513A

CUSTOMER: James Marx, Esq
James A. Marx, Esq
Suite 1870
200 South Biscayne Boulevard
Miami, FL 33131-2377

ANNUAL REPORT FILING

NAME: TINTER, INC.

98 APR 14 AM 11:22
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lynette Coleman

EXAMINER'S INITIALS: _____