

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

**APPROVED AND FILED**

CORPORATION ANNUAL REPORT 1995



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

05 MAY - 1 PM 0:47

DOCUMENT # **M27113** (3)

T. Corporate Name  
**TAMARAC CHAIR CORP.**

CREATED BY THE  
TAMARAC CHAIR CORP.

Principal Place of Business: **3661 N. FEDERAL HWY FT. LAUDERDALE F 33308 US**

Mailing Address: **3661 N. FEDERAL HWY FT. LAUDERDALE FL 33308 US**

(DO NOT WRITE IN THIS SPACE)

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>02/10/1986</b>	3a. Date of Last Report <b>05/01/1994</b>
21	26	4. FEI Number <b>59-2691037</b>		Applied For Not Applicable	
22	27	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24	25	29	30	8. This corporation has liability for intangible tax under S. 199.11(2) Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>LEVY, BRUCE J. 3661 N. FEDERAL HWY. FT. LAUDERDALE FL 33308</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	<b>FL</b>	85

11. Pursuant to the provisions of Sections 607.0102 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 I accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
OFFICE	<b>D</b>	1. OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LEVY, BRUCE J.</b>	1. NAME	
STREET ADDRESS	<b>3661 N. FEDERAL HWY.</b>	1. STREET ADDRESS	
CITY, STATE, ZIP	<b>FT. LAUDERDALE FL</b>	1. CITY, STATE, ZIP	
2. OFFICE		2. OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		2. NAME	
2. STREET ADDRESS		2. STREET ADDRESS	
2. CITY, STATE, ZIP		2. CITY, STATE, ZIP	
3. OFFICE		3. OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. NAME		3. NAME	
3. STREET ADDRESS		3. STREET ADDRESS	
3. CITY, STATE, ZIP		3. CITY, STATE, ZIP	
4. OFFICE		4. OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. NAME		4. NAME	
4. STREET ADDRESS		4. STREET ADDRESS	
4. CITY, STATE, ZIP		4. CITY, STATE, ZIP	
5. OFFICE		5. OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. NAME		5. NAME	
5. STREET ADDRESS		5. STREET ADDRESS	
5. CITY, STATE, ZIP		5. CITY, STATE, ZIP	
6. OFFICE		6. OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		6. NAME	
6. STREET ADDRESS		6. STREET ADDRESS	
6. CITY, STATE, ZIP		6. CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that I am an officer or director of the corporation or the registered trustee empowered to file this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1 or Block 13 of a filing of this information with an address.

SIGNATURE:  **BRUCE J. LEVY** 4-24-95 305-561-4112

MONITOR AND TYPE (PRINT) THE NAME OF SIGNING OFFICER OR DIRECTOR