

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 14 1997 8:00am
Secretary of State

DOCUMENT # P94000044639 (0)

1. Corporation Name

TCF INTERNATIONAL, INC.

Principal Place of Business

201 E. PINE ST.
SUITE 1200
ORLANDO FL 32801

Mailing Address

201 E. PINE ST.
SUITE 1200
ORLANDO FL 32801

3. Date Incorporated or Qualified

06/15/1994

3a. Date of Last Report

04/18/1998

4. FEI Number

59-3255013

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

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

9. Name and Address of Current Registered Agent

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

PRICE, PAMELA O
201 E. PINE ST.
SUITE 1200
ORLANDO FL 32801

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

TITLE	D	☐ DELETE
NAME	FUJITA, SENJI	
STREET ADDRESS	201 E. PINE ST., #1200	
CITY - ST - ZIP	ORLANDO FL 32801	
TITLE	DP	☐ DELETE
NAME	TAKAI, YOSHIMI	
STREET ADDRESS	201 E. PINE ST., #1200	
CITY - ST - ZIP	ORLANDO FL 32801	
TITLE	DV	☐ DELETE
NAME	WIENER, WILLIAM J	
STREET ADDRESS	201 E. PINE ST., #1200	
CITY - ST - ZIP	ORLANDO FL 32801	
TITLE	DS	☐ DELETE
NAME	KAWAJ, KOICHI	
STREET ADDRESS	201 E. PINE ST., #1200	
CITY - ST - ZIP	ORLANDO FL 32801	
TITLE	DT	☐ DELETE
NAME	NODA, YUJI	
STREET ADDRESS	201 E. PINE ST., #1200	
CITY - ST - ZIP	ORLANDO FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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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)(b), Florida Statutes. If I am not the registered agent, I 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 by the registered agent; 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 signature appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/97 352-324-2101
Date Daytime Phone