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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # V1006	60 (4)					
TINKER	, INC.				. 1480 1180 1180 1180 1880 1880 1880 1880 1880 1880 1880 1880 1880 1880 1880 1880	LOH BIBN BIBN BIBN BIBN BIBN	NON BISH 1881
fair in al Diago	of Divisional	Mailing Address					
2878 DUNLIN DELRAY BEAC		DELRAY BEACH FL 334	44				
					3. Date Incorporated or Qualified 01/27/1992	3a. Date of Last Re 04/20/199	*
Principal Place of Business 2a. Mailing Ad				······································	4. FEI Number	ļ	Applied For
21		26			65-0314170		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc					5. Certificate of Status Desired		Additional Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.0	O May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country Zip		Count	ry	8. This corporation has liability for intangible tax under s 199.032,		199.032,
24	25 29 29 9. Name and Address of Current Registered Age		30]		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Curr	ent Registered Agent	B	1 Name	To. Maille alla Addiess of Notice		
BECK, ARTHUR F. 2878 DUNLIN RD DELRAY BEACH FL 33444				2 Street Addr	Idress (P.O. Box Number is Not Acceptable)		
			*	2 Street Addi	ess (r.o. gov Marrisor is Mot Accopiac		
			8	3			
			E	4 City		FL 85 Zi	p Code
					ration submits this statement for the pu		registered office
familiar wit	th, and accept the obligations of, Se Signature typed or printed name of registered as	ection 607.0505, Florida Statutes	•	gent signature require	and of directors. I hereby accept the app ad when reinstalking: ADDITIONS/CHANGES TO OFF	DATE	
TITLE	D	DELETE 1.11 , ARTHUR F 12 N DUNLIN RD 13 S AY BEACH FL 140		E		☐ Change	☐ Addition
NAME	BECK, ARTHUR F			ıξ.			
STREE1 ADDRESS	2878 DUNLIN RD			EET ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL			-ST-ZIP		Change	Addition
THTLE	D DEOL SAME	O DONEIT TID					
NAME STREET ADDRESS				EE1 ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL			r-ST-ZIP			
TITLE		☐ DELETE 3 1		LE		☐ Change	☐ Addition
NAME			3.2 NAM	AE			
STREET ADDRESS				REET ADDRESS			
CHY-ST-7P				Y-ST-ZIP		Change	Addition
TITLE		LT percie	4. 1 TIT 4.2 NA	i i		□a.	<u> </u>
NAME 670007 ADDRESS				EET ADDRESS			
STREET ADDRESS				Y-ST-ZIP			
CITY - S1 - ZIP TITLE		DELETE	5 1 Til			Change	Addition Addition
NAME			5.2 NAI	NE			
STREET ADDRESS			5.3 ST6	REET ADDRESS			
	1						
CITY - S1 - ZIP				Y-SI-ZIP		Chorac	C Addition
CIFY-S1-ZIP TITLE		DELETE	6 1 TH	Y-SI-ZIP LE		Change	Addition
		☐ DELETE	6 1 TH 6.2 NA	Y-SI-ZIP LE ME		☐ Change	☐ Addition
TITLE		☐ DELETE	6 1 TH 6.2 NA 6.3 STI	Y-SI-ZIP LE		☐ Change	Addition

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.

SIGNATURE: SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

4/15/96 407-265-2956
Daytoria Proce #