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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 255064

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DADELAND CENTER THOM MCAN, INC.

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May 12 1997 8:00am
Secretary of State

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(201) 934, 2000

Principal Plac	e of Businoss	Mailing Address		22/4	0 0 0 0 3 0 6
ÉN MILLÉROOK WORCESTER N	1A Q1606	OZ MILLBROOK ST. WORCESTER MA 01606-2	817	•	
933 MA	CARTHUR BLVD.	^{US} 933 MAC A	RTHUR BLV	3. Date Incorporated or Qualified	3a. Date of Last Report
MAHWAH, N.J. 07430		MAHWAH, N.J. 07430		01/17/1962	05/01/1996
Principal P	lace of Business	2a. Mailing Address	THE ! TATE ! THE	4. FEI Number	Applied F
		26		04-2305692	Not Appli
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition Fee Required
City & State	8	City & State		6. Election Campaign Financing	\$5.00 May B
		28		Trust Fund Contribution	Added to Fees
Zip	Country	Žφ	Country	8. This corporation has liability for i	intengible tax under s. 199.03
<u> </u>	25 USF	[29]	30 VSA		Yes No
	9. Name and Address of Curren	nt Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	TES STATES CORP CO				
	North Magnolia St. Ahassee Fl 32301		82 Street	Address (P.O. Box Number is Not Acceptab	ole)
IAU	ANAGGEE FL 32301		В3		
			04 65		12-1
			84 City		FL 85 Zip Code
=	Tribining with and accept the oblig	lations of, Section 607.0505, F	ionda Statutes.	poralion's board of directors. Thereby accep	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NC	DTE: Fing stered Agent signature	required when reinstating)	DATE
SIGNATURE	Signature, typed or printed name of registered ag			required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
SIGNATURE 12. IITLE	Signature, typed or printed name of registered ag	ent and title if applicable. (NO	DTE: Fireg stered Agent signature	required when roinstating) ADDITIONS/CHANGES TO OFFICE P. J.M. ROBINSON	DATE DERS AND DIRECTORS IN 12 Change A
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