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FILED
Jan 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 434588 (0)

1. Corporation Name
TUBETEC, INC.



Principal Place of Business 301 BROWN AVENUE SANFORD FL 32771 US	Mailing Address 301 BROWN AVENUE SANFORD FL 32771-1608 US
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3. Date Incorporated or Qualified 09/07/1973	3a. Date of Last Report 01/30/1996
4. FEI Number 59-1510696	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 301 BROWN AVENUE	2a. Mailing Address
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State SANFORD, FL	27. City & State
24. Zip 32771	25. Country USA
29. Zip	30. Country

9. Name and Address of Current Registered Agent

**FRANA, FRANK J. III
 2822 TUPELO COURT
 LONGWOOD FL 32779**

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

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 _____ DATE _____
 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	FRANA, FRANK J JR	
STREET ADDRESS	2822 TUPELO COURT	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	FRANA, FRANK S III	
STREET ADDRESS	2822 TUPELO COURT	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	FRANA, DANIEL	
STREET ADDRESS	1692 WINGFIELD DR	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FRANA, RUTH	
STREET ADDRESS	2822 TUPELO COURT	
CITY - ST - ZIP	LONGWOOD FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	FRANA, STEPHEN	
STREET ADDRESS	2100 PUERTO RICO RD	
CITY - ST - ZIP	DELTONA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	32779-3007	
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	FRANK J. FRANA III	
2.3 STREET ADDRESS	32779-3007	
2.4 CITY - ST - ZIP		
3.1 TITLE	32779-3007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	32779-3007	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	32738	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 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 in an attachment with an address.

SIGNATURE: *Frank J. Frana Jr.* 1/09/97 407-323-0940

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FRANK J. FRANA JR.

CRE034 (9/96)