## 5-8-97 B (do)3 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 566108

(7)

**TEQUESTA CORPORATION** 

## **FILED** May 08 1997 8:00am Secretary of State



Principal Place 12620 SW 107 MIAMI FL 3317	AVE.	12620 SW 10	Mailing Address 12620 SW 107 AVE. MIAMI FL 33176-4740							
						3. Date Incorporated or Qualified 02/09/1978	3a. Date	of Last F 3/1996		
2. Principal Pl	ace of Business	2a. Mailing A	ddress			4. FEI Number 65-0145717			applied For lot Applicable	
Suite, Apt.	#, etc.	Suite, Ap	i. #, etc.			6. Certificate of Status Desired		\$8.75	Additional Required	
City & State	9	City & Sta	ate		7.7111112/78.56	6. Election Campaign Financing Trust Fund Contribution			May Be	
Zip	Country 25	Ζ(p)	Zip Cou		,	8. This corporation has liability for intangible tax under Florida Statutes Yes No				
· <del>=31</del> 	9. Name and Address of Cu			1		10. Name and Address of New Re				1
1262	LIVAN, ANNEIL H. 20 SOUTHWEST 107 AVENU MI FL 33176			81 82 83	Name Street Add	dress (P.O. Box Number is Not Acceptab				
				84	City		FL	<b>85</b> Zip	Code	
agent lar	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	.0502 and 607.1508, F State of Florida Such o abligations of, Section (	lorida Statutes, hango was auth 607.0505, Florida	the aboverized by a Statute	e-named co the corpora s.	rporation submits this statement for the p ation's board of directors. I hereby accep		hanging niment as	its registered s registered	
SIGNATURE	Signature, typed or printed name of registere	ed agent and title if applicable	(NOTE: Bo	gistéred Ag	ont signature req	uired when reinstaing)	DATE			Ì
12.	OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO			RS IN 12	Í	
TITLE	8		DELETE .	1.1 TITLE			Ε	Change	Addition	ő
NAME :	SULLIVAN, DANIEL J.		1.2							5
STREET ADDRESS	12620 S.W. 107 AVENUE		1.3 STREET	ADDRESS					ĬŽ	
CITY-ST-ZIP	MIAMI FL PD		L DV L C VE	1.4 CHY-5	1-ZIP			7.00	T 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ģ
TITLE	SULLIVAN, ANNEIL H.	L	] DELETE	2.1 TITLE			L.	Change	L_J Addition	1
NAME	12620 S.W. 107 AVENUE			2.2 NAME	4000000					
STREET ADDRESS CITY-ST-ZIP	MAMI FL		1	2.3 STREET 2 4 CHY-	1					1
TITLE		·	DELETE	3.1 TITLE	31-71		т Т	Change	Addition	1
NAME				32 NAME			_			}
STREET ADDRESS				33 STHEET	ADDRESS					
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TITLE		Ĺ	DELFTE	4.1 1rtL€				Change	Addition	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-ZIP				4.4 CHY-5	11-7IP					_
TITLE			DELETE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP				54CITY-S	31 - ZIP			<del></del>		-
TITLE			DELETE	6.17171.1			Ī	Change	Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 ISTREET	ADDRESS					
CITY-ST-ZIP				6.4 CITY - 5						1
SALL I dia barah	ou partiful that the information cur	sakad with this filian de	or not audifu fo	ar tha ava	motion alak	ad in Continu 110 07(9)(i) Clarida Ctatula	a I farribar a	مطلا بالأناسم	4 46.0	1

Information indicated on this annual report or supplies with this iming does not quality 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 the and accurate and that my signature shall have the same legal effect as if made under each; 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 chapterd, or on an attachment with an addition.