

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
David H. Montgomerie
Secretary of State
1900 BANK OF AMERICA BUILDING
TALLAHASSEE, FLORIDA 32399-0001

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DOCUMENT # 834521

(7)

1. Corporation Name:

T.Y. LIN INTERNATIONAL

9-11-1995 3:28

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Principal Place of Business:

**825 BATTERY ST
SAN FRANCISCO CA 94111**

Mailing Address:

**825 BATTERY ST
SAN FRANCISCO CA 94111**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 06/12/1975	3a. Date of Last Report 06/07/1994
4. FID Number 94-1598707	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. 192 D.S.F. Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business:

21

State: Apt # etc:

22

City & State:

23

24

25

2b. Mailing Address:

26

State: Apt # etc:

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City & State:

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9. Name and Address of Current Registered Agent

**PURTE, GEORGE
7835 SUNNYMEADE DR N
JACKSONVILLE FL 32211**

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 607.05(2) and 607.15(8) 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 607.05(2) Florida Statutes.

SIGNATURE:

(Signature of Registered Agent or Director)

(Signature of New Registered Agent or Director)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	TITLE	☐ Change ☐ Addition
NAME	CHOW, PHILIP	NAME	DELETE
STREET ADDRESS	825 BATTERY ST	STREET ADDRESS	
CITY, ST, ZIP	SAN FRANCISCO CA	CITY, ST, ZIP	
TITLE	P	TITLE	☒ Change ☐ Addition
NAME	PETERSON, ROBERT A	NAME	P/D ZWEIGHART, SIMON
STREET ADDRESS	825 BATTERY ST.	STREET ADDRESS	825 BATTERY ST.
CITY, ST, ZIP	SAN FRANCISCO CA	CITY, ST, ZIP	SAN FRANCISCO, CA 94111
TITLE	T	TITLE	☒ Change ☐ Addition
NAME	PETERSON, ROBERT	NAME	T/D/VP/S PETERSON, ROBERT A.
STREET ADDRESS	825 BATTERY ST	STREET ADDRESS	825 BATTERY ST.
CITY, ST, ZIP	SAN FRANCISCO CA	CITY, ST, ZIP	SAN FRANCISCO, CA 94111
TITLE	S	TITLE	☒ Change ☐ Addition
NAME	PETERSON, ROBERT A	NAME	D/VP TAI, JAMES
STREET ADDRESS	825 BATTERY ST.	STREET ADDRESS	825 BATTERY ST.
CITY, ST, ZIP	SAN FRANCISCO CA	CITY, ST, ZIP	SAN FRANCISCO, CA 94111
TITLE		TITLE	☐ Change ☒ Addition
NAME		NAME	VP/B BERMAN, JOBY
STREET ADDRESS		STREET ADDRESS	6960 N. MILWAUKEE AVENUE
CITY, ST, ZIP		CITY, ST, ZIP	CHICAGO, IL 60646
TITLE		TITLE	☐ Change ☒ Addition
NAME		NAME	VP ASHLEY, MARK
STREET ADDRESS		STREET ADDRESS	5030 CAMINO DE LA SIESTA #204
CITY, ST, ZIP		CITY, ST, ZIP	SAN DIEGO, CA 92106

14. I, the undersigned, certify that the information required with this filing is voluntarily furnished and is true and correct, and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the registered or business agent authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report, or on an attachment with an address.

SIGNATURE:

(Signature and Typed or Printed Name of the Signing Officer or Director)

ROBERT A. PETERSON

4/24/96

(416) 291-3700