
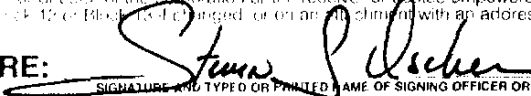


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 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	
DOCUMENT # J 32409 1. Corporation Name TS ENTERPRISES of TAMPA, INC			
Principal Place of Business 2011 S. PARSONS SEFFNER, FL 33584		Mailing Address 4506 Woodmere Rd TAMPA, FL 33609	
2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 09/01/1986		3a. Date of Last Report 05/17/1996	
4. FEI Number 59-2719025		Applied For 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			
9. Name and Address of Current Registered Agent OSCHER, STEVEN S 4506 WOODMERE RD TAMPA, FL 33609		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
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: (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS 11.1 TITLE 12.1 NAME 13.1 STREET ADDRESS 14.1 CITY - ST - ZIP 15.1 TITLE 16.1 NAME 17.1 STREET ADDRESS 18.1 CITY - ST - ZIP 19.1 TITLE 20.1 NAME 21.1 STREET ADDRESS 22.1 CITY - ST - ZIP 23.1 TITLE 24.1 NAME 25.1 STREET ADDRESS 26.1 CITY - ST - ZIP 27.1 TITLE 28.1 NAME 29.1 STREET ADDRESS 30.1 CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11.1 TITLE 12.1 NAME 13.1 STREET ADDRESS 14.1 CITY - ST - ZIP 15.1 TITLE 16.1 NAME 17.1 STREET ADDRESS 18.1 CITY - ST - ZIP 19.1 TITLE 20.1 NAME 21.1 STREET ADDRESS 22.1 CITY - ST - ZIP 23.1 TITLE 24.1 NAME 25.1 STREET ADDRESS 26.1 CITY - ST - ZIP 27.1 TITLE 28.1 NAME 29.1 STREET ADDRESS 30.1 CITY - ST - ZIP	
14. I, the undersigned, 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 included in 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 or changed, or on an amendment with an address.		100002123121 -03/25/97--01009--040 ***165.00	
SIGNATURE:  STEVEN S. OSCHER		Date: 3/4/97 Daytime Phone #: (813) 229-8250	

CR2E034 (9/96)