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

PROFIT CORPORATION ANNUAL REPORT

1997

I am an officer or di appears in Block 72



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J46201

(6)

TEDC/SHELL CITY, INC. Principal Place of Business Mailing Address 645 N.W. 62ND STREET 645 N.W. 62ND STREET SUITE 300 Suite 300 MIAMI FL 33150 MIAMI FL 33150-4329 3a. Date of Last Report 3. Date Incorporated or Qualified 12/08/1986 03/05/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2755843 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Zio Country ZiD 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 Florida Statutes 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WOLFE, LEON J 100 SE 2ND ST. Street Address (P.O. Box Number is Not Acceptable) STE. 3800 83 **MIAMI FL 33131** 84 Zip Code 11. Pursuant to the previsions 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 farmer with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and fille it applicable (NOTE: Registered Agent signature required when reinstaling) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition DELETE 1.1 TITLE TIME SIMMONS, LORENZO NAME 1.2 NAME 645 NW 62ND ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE FLORENCE. MOSES NAME 22 NAME 845 NW 62ND ST, #300 STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE PITTS, OTIS JR NAME 3.2 NAME 645 NW 62ND ST, #300 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY - ST- ZIP CITY-ST-ZiP DELETE Change Addition TITLE 4.1 TITLE ROLLE, ANTHONY 4 2 NAME NAME 645 NW 62ND ST, #300 4 3 STREET ADDRESS STREET ADDRESS MIAMI FL 4.4 CiTY-ST-ZIP CITY-S1-ZIP DELETE Change Addition 5.1 TITLE TITLE PARKER, CAROL 5.2 NAME NAME 645 NW 62ND ST, #300 STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL CITY-ST-70P 5.4 CITY-ST-ZIP Addition DELETE Channe 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP CITY - ST - 7/P

Lorenzo Simmons, Pres. 1/6/97 (305) 757-3737

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 in same legal effect as if made under

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 of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name