

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J59729** (0)

1. Corporation Name

TUC-REN ENTERPRISES, INC.



Principal Place of Business

Mailing Address

% ERNESTO RENCURRELL
1698 S.W. 143 PL.
MIAMI FL 33175

% ERNESTO RENCURRELL
1698 S.W. 143 PL.
MIAMI FL 33175

3. Date Incorporated or Qualified
02/25/1987

3a. Date of Last Report
08/04/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

59-2811829

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. 199.032, Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RENCURRELL, ERNESTO
1698 S.W. 143 PL.
MIAMI FL 33175

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RENCURRELL, BARBARA
STREET ADDRESS 1698 S.W. 143 PL.
CITY-ST-ZIP MIAMI FL ☒ DELETE

1.1 TITLE PD
1.2 NAME RENCURRELL, Ernesto
1.3 STREET ADDRESS 1698 S.W. 143 PLACE
1.4 CITY-ST-ZIP MIAMI, FL 33175-7092 ☒ Change ☐ Addition

TITLE VD
NAME RENCURRELL, ERNESTO
STREET ADDRESS 1698 S.W. 143 PL.
CITY-ST-ZIP MIAMI FL ☒ DELETE

2.1 TITLE V/D
2.2 NAME PAEZ, FRANCISCO J.
2.3 STREET ADDRESS 16414 S.W. 86 COURT
2.4 CITY-ST-ZIP MIAMI, FL 33157- ☒ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE T/S/D
3.2 NAME RENCURRELL, BARBARA
3.3 STREET ADDRESS 1698 S.W. 143 PLACE
3.4 CITY-ST-ZIP MIAMI, FL 33175-7092 ☐ Change ☒ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE:

Ernesto Rencurrell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/96
Date

(305) 221-2775
Daytime Phone #

CR2E034 (12/95)