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May 27 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 # J59729 (0)

1. Corporation Name
TUC-REN ENTERPRISES, INC.

Principal Place of Business

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

Mailing Address

% ERNESTO RENCURRELL
1698 S.W. 143 PL.
MIAMI FL 33175-7082



3. Date Incorporated or Qualified
02/25/1987

3a. Date of Last Report
04/25/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

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

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

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 607.0502 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

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

☐ DELETE

TITLE VD
NAME PAEZ, FRANCISCO J.
STREET ADDRESS 1698 S.W. 143 PL.
CITY - ST - ZIP MIAMI FL

☐ DELETE

TITLE TDS
NAME RENCURRELL, BARBARA
STREET ADDRESS 1698 SW 143 PLACE
CITY - ST - ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 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 ERNESTO RENCURRELL 5/19/97 (305) 221-2775

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

May 17, 1997

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Tuc-Ren Enterprises, Inc
FEI # 59-2811829

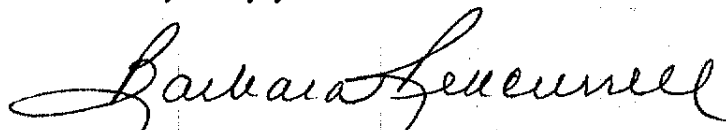
To Whom It May Concern:

I am enclosing herewith a check in the amount of \$165.00 for the renewal of the above-mentioned corporation.

Due to my involvement in a car accident which resulted in retina detachment of my right eye and subsequent surgery and recuperation, I was unable to submit the required fee on or before May 1st as required. I would like to have the corporation renewed and will be able to provide you with additional proof and/or information, if so required, with regards to the unusual circumstances involved that prevented me from submitting the required fee prior to May 1, 1997.

Thank you in advance for your attention to this matter.

Very truly yours,



Barbara Rencurrell
Treasurer /Secretary
1698 S.W. 143 Place
Miami, Florida 33143
(305) 221-2775
(305) 221-1098 Fax