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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J78157

(1)

TAMBONE COMMERCIAL REAL ESTATE, INC.

Principal Place of Business Mailing Address										
4200 WACKEN		4200 WACKENHUT DRIVE	:			·				
SUITE 110	noi onite	SUITE 110								
	GARDENS FL 33410	PALM BEACH GARDENS	FL 33410	4242						
US		US				3. Date Incorporated or Qualit 06/17/1987		ate of Last F /01/1996	leport	
2. Principal P	lace of Business	2a. Mading Address 26		•		4. FEI Number 59-2836716		<del></del>	oplied For ot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.				E Cartificate of Status Deplea		\$8.75	Additional	
22		27				5. Certificate of Status Desired	·	Fee R	equired	
City & State	e	City & State				6. Election Campaign Financir	9	\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	_ Co	untry		8. This corporation has liability			199.032	
24	25	29	30			Florida Statutes	Yes			
	9. Name and Address of Currer	nt Registered Agent				10, Name and Address of Ne	v Registered	Agent	<del></del>	
	NIGAN, JOHN F			81	Name					
625	N. FLAGLER DR.			82	Street Add	dress (P.O. Box Number is Not Acce	ptable	····		
9TH	FLOOR, BARNETT CENTRE				2					
WES	ST PALM BEACH FL 33401			83						
				84	City			Se   7:0	Codo	
				04	City		FL	_ <b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the e	bove	-named co	rporation submits this statement for	he purpose o	of changing i	ts registered	
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, Fl	authoriz€ lorida Sta	d by	the corpora i.	ation's board of directors. I hereby a	ccept the ap	pointment as	registered	
SIGNATURE	Signature typed or printed name of registered age	col and title if employable (NO)	IE: Danieter	od Ana	nt signature rec	uired when reinstating)	DATE			
12.		D DIRECTORS	13.	o ngo	int eignesure req	ADDITIONS/CHANGES TO C		DIRECTOR	RS IN 12	
TITLE	DPVT	DELETE		ITLE		1100110101010101010		Change	Addition	
NAME	TAMBONE, LORI B			IAME				man over 190	hand viscoir a	
STREET ADDRESS	4200 WACKENHUT DR. SUITE	110			ADDRESS					
	PALM BEACH GARDENS FL									
CITY-ST-ZIP	TALIII DENOTI GATIDETTO TE	DELETE		ITY-S	1-ZIP			Change	Addition	
TITLE		Direct	2.17					L Citaliya	L.J Addition	
NAME				IAME						
STREET ADDRESS					ADDRESS					
CITY - ST - ZIF		Florette			ST-ZIP	,		1 6		
TITLE		DELETE	3.1 7					Change	Addition	
NAME				IAME						
STREET ADDRESS			3.3 \$	TREET	ADDRESS					
CITY - S1 - ZIP	***************************************				ST-ZIP					
TILLE		☐ OELETE	4.11	ITLE				☐ Change	Addition	
NAME			4. 2	NAME						
STREET ADDRESS			4.3 \$	TREET	ADDRESS					
CHY-S1-ZP			4.4 (	ITY-S	T - ZIP					
THLF		DELETE	5.1 1	ITLE				Change	Addition	
NAME			5.2	IAME						
STREET ADDRESS			5.3 \$	TREET	ADDRESS					
CITY-S1-ZIP				HTY-S						
TITLE		DELETE	6.1 7		·- <u></u>	ı		Change	Addition	
NAME		<del></del>		IAME						
STREET ADDRESS					ADDRESS					
CITY - S1 - ZIP			■ 6.4 (	HTY-S	1-211/					

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 SIGNATURE:

**FILED** 

May 08 1997 8:00am

Secretary of State

561-675-0008