

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

50 MAY -1 PM 2:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J95421 (0)

1. Corporation Name:

TUT POWER, INC.

Principal Office (Mailing Address)

225 SOUTHWEST 33 COURT
FORT LAUDERDALE FL 33315
US

Mailing Address

PO BOX 21368
FORT LAUDERDALE FL 33335-1368
US

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

09/30/1987

3a. Date of Last Report

05/01/1994

2. Principal Office (Mailing Address)

21

2b. Mailing Address

26

4. FEI Number

65-0055081

Applied For

Not Applicable

22. State Apartment

22

27. State Apartment

27

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

23. City & State

23

28. City & State

28

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

24. Country

24

25. Country

25

29. Country

29

30. Country

30

8. This corporation has been organized in accordance with the laws of the State of Florida

Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUBIN, O. JOHN
1821 SOUTHWEST FOURTH AVENUE
FORT LAUDERDALE FL

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0807 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 607.0808, Florida Statutes.

SIGNATURE

(Print name of person who signed and typed on printed name of signing officer or director)

(Print name of person who signed and typed on printed name of signing officer or director)

(Print name of person who signed and typed on printed name of signing officer or director)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	DP RUBIN, O. JOHN 225 SW 33 CT FORT LAUDERDALE FL	1. NAME	☐ Change ☐ Addition
NAME	VST GERCAK, CLAUDIA 225 SW 33 CT FT. LAUDERDALE FL	2. NAME	☐ Change ☐ Addition
NAME		3. NAME	☐ Change ☐ Addition
NAME		4. NAME	☐ Change ☐ Addition
NAME		5. NAME	☐ Change ☐ Addition
NAME		6. NAME	☐ Change ☐ Addition
NAME		7. NAME	☐ Change ☐ Addition
NAME		8. NAME	☐ Change ☐ Addition
NAME		9. NAME	☐ Change ☐ Addition
NAME		10. NAME	☐ Change ☐ Addition
NAME		11. NAME	☐ Change ☐ Addition
NAME		12. NAME	☐ Change ☐ Addition
NAME		13. NAME	☐ Change ☐ Addition
NAME		14. NAME	☐ Change ☐ Addition
NAME		15. NAME	☐ Change ☐ Addition
NAME		16. NAME	☐ Change ☐ Addition
NAME		17. NAME	☐ Change ☐ Addition
NAME		18. NAME	☐ Change ☐ Addition
NAME		19. NAME	☐ Change ☐ Addition
NAME		20. NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Paragraph 13(b)(1) of the Florida Statutes. I further certify that the information contained on this annual report or supplemental annual report is true and accurate and that my signature shall be in the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears on the filing of this report as an officer or director with an address.

SIGNATURE:

(Print name of person who signed and typed on printed name of signing officer or director)

4-24-95 (305) 467-1508