SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # K03777 (5)

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T & E RE	EALTY, INC.							
Principal Place	of Business	Mailing Address			) 18818111 A11 48188 1114 12811 12811 188	ii Alibii Bidis Aldes dinij Albis Bidse jägt		
1400 TALLWOO	D AVE	1400 TALLWOOD AVE						
APT #103. TAL	LWOOD EAST	APT #103, TALLWOOD EAS	ST					
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021					3. Date Incorporated or Qualified 11/25/1987	3a, Date of Last Report 01/18/1995		
		A- Mail - A Address			4. FEI Number	Applied For		
2. Principal Pla	ce of Business	2a. Mailing Address			65-0015558	Not Applicable		
Suite, Apt #	elc	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional		
2	. 010	27			5. Certificate of status besied	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees			
3]		28	Country		Trust Fund Contribution  8. This corporation has hability for			
Zip	Country	Zip 3	30		Florida Statutes	Yes No		
<u> </u>	25 9. Name and Address of Current				10. Name and Address of New Re	gistered Agent		
MAE	RTIN, THOMAS J.		81	Name				
	O TALLWOOD AVE		82	82 Street Address (P.O. Box Number is Not Acceptable)				
	#103, TALLWOOD EAST		-					
	LYWOOD FL 33021		83					
			B4	City		FL 85 Zip Code		
	Contagn 607 050	2 and 607 1508. Floring Stabules	the above	-named corp	oration submits this statement for the p	unioco of changing its registered		
	o the provisions of Sections 607.0507 gistered agent, or both, in the State in In tamiliar with, and accept the obliga				oration submits this statement for the p on's board of directors. Thereby accep	I the appointment as registered		
SIGNATURE	Signature, type of or printed name of registered age	or and trie it applicable (NOTE	Registered Age	ent signature requi	red when reinstating?	DAIL		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFI			
TITLE	PD	DELETE	1 1 TITLE			Change Additio		
NAME	MARTIN, THOMAS J.		1.2 NAME					
STREET ADDRESS	1400 TALLWOOD AVE #103		1	FADORESS				
CITY-ST-ZIP	HOLLYWOOD FL	DELETE	1.4 CiTY -: 2.1 TiTLE	ST · ZIP		Change Additio		
TITLE	STD	beccie	2 2 NAME			<del></del>		
NAME	MARTIN, EVELYN G. 1400 TALLWOOD AVE #103		•	T ADDRESS				
STREET ADDRESS	HOLLYWOOD FL		2 4 CiTY -					
CITY-ST-ZIP	HOLETWOODTE	DELETE	3 1 TETLE			Change Additio		
NAME			3 2 NAME					
STREET ADORESS			3 3 STREE	T ADDRESS				
CITY-ST-ZIP		Locusto	3 4. CITY	ST - ZIP		Change Addition		
TITLE		DELETE	4 1 TITLE 4. 2 NAME			— +		
NAME				T ADDRESS				
STREET ADDRESS			4.4 CITY -					
CITY - ST - ZIP		DELETE	5 1 TITLE			Change Addition		
NAME		<del></del>	5.2 NAME	1				
STREET ADDRESS			53STHE	T ADDRESS				
CITY-ST-ZIP			5 4 CITY			Change Addit:		
TITLE		DELETE	6 1 TITLE	l l		Change Advans		
NAME			62 NAME	i				
STREET ADDRESS			i	ET ADDRESS				
CITY - ST-ZIP	by certify that the information supplied	ed with this filing is voluntarily fu	fished and	I al a a a a a a l au c	alify for the exemption stated in Section	119.07(3)(k), Florida Statutes		
further ce	ertify that the information indicated or derinath: that I am an officer or direc	tor of the corporation or the rece	eiver or trus	tee empower	ed to execute this report as required by	Chapter 617. Florida Statutes, and		
SIGNAT	TURE: Thomas JA	Martin -Th	Ona	1 m	nton: 6-10-90	413.734-849		
JIGHA	SIGNATURE AND TYPED C	OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR		(頃少	Digitale Photos F		