


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

FILED

**Feb 18 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K25800 (9)
1. Corporation Name
TAMEL PROPERTIES, INC.

Principal Place of Business 16175 NW 49 AVE MIAMI FL 33014-314 US	Mailing Address 16175 NW 49 AVE MIAMI FL 33014-6312 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/07/1988	3a. Date of Last Report 02/19/1996
21	22	26	27	4. FEI Number 65-0056466	Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip		Country			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
COPROLITE CORPORATION 1400-A AMERIFIRST BUILDING ONE SOUTHEAST THIRD AVENUE MIAMI FL 33131				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				85	Zip Code
				FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURGEL, CARLOS A.P.	1.2 NAME	
STREET ADDRESS	16175 NW 49TH AVE.	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	
TITLE	VAT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOARES, RUY	2.2 NAME	
STREET ADDRESS	16175 NW 49TH AVENUE	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	
TITLE	VAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAVANE, BRUCE	3.2 NAME	
STREET ADDRESS	16175 NW 49 AVE.	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	3.4 CITY - ST - ZIP	
TITLE	DVTS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ESTIMA, LUIS F.	4.2 NAME	
STREET ADDRESS	16175 NW 49 AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	4.4 CITY - ST - ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLENKER, DAVID	5.2 NAME	
STREET ADDRESS	16175 NW 49TH AVE.	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	5.4 CITY - ST - ZIP	
TITLE	AS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOOM, SI H	6.2 NAME	
STREET ADDRESS	16175 N.W. 49 AVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	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: _____ DATE: **2/11/97** 628

CR2E034 (9/96)