

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

DOCUMENT # **K81622** (8)

1. Corporation Name
TIME INFORMATICA CORP.

FILED
95 JAN 27 PM 3:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
4805 NW 79TH AVE SUITE 1 MIAMI FL 33166
4805 NW 79TH AVE SUITE 1 MIAMI FL 33166

3. Date Incorporated or Qualified **04/19/1989** 3a. Date of Last Report **02/22/1994**

4. FEI Number **65-0131158** 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 20 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EDUARDO, CARLOS
~~707 N.W. 111TH COURT~~
~~APT. 7~~
~~MIAMI FL 33172~~

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
4591 Fontainebleau Blvd #223
83
84 City **Miami** FL 85 Zip Code **33172**

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|----------------|------------------------------------|
| TITLE | PD |
| NAME | BICALHO, CARLOS EDUARDO |
| STREET ADDRESS | 707 N.W. 111 COURT, #7 |
| CITY-ST-ZIP | MIAMI FL |
| TITLE | STD |
| NAME | BICALHO, CELESTE AIDA |
| STREET ADDRESS | 707 N.W. 111 COURT, #7 |
| CITY-ST-ZIP | MIAMI FL |
| TITLE | VP |
| NAME | GOMES, CARLOS A PEREIRA |
| STREET ADDRESS | 707 N.W. 111 COURT, #7 |
| CITY-ST-ZIP | MIAMI FL |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| | |
|--------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | 4591 Fontainebleau Blvd #223 |
| 1.4 CITY-ST-ZIP | Miami Florida 33172. |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | 4220 SW 148 Place |
| 2.4 CITY-ST-ZIP | Miami FL, 33185 |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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; that 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 in my assignment with an address.

SIGNATURE:

[Signature] **Carlos E. Bicalho** 1-23-95
Date: _____ Digitize (Fees) \$ _____