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

PROFIT CORPORATION ANNUAL REPORT

TYLER VENTURES II, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # 1. Corporation Name

L78503

(4)

FILED Apr 15 1996 8:00 am Secretary of State

	BIRIL 1986 HER

Principal Place o	if Business	Mailing Address					
% JEFFREY N. MARKS 2040 NE 163RD ST MIAMI FL 33162		% JEFFREY N. MARKS 2040 NE 169RD ST MIAMI FL 33162					
				3. Date incorporated or Qualified 06/05/1990	3a. Date of Last Report 04/27/1995		
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-0218423	Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		Orty & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees	
23		28			Trust Fund Contribution 8. This corporation has liability for		
Zip	Country	Ζφ	Country 30			X No	
24	25 9. Name and Address of Curr	29 ant Registered Agent	130]		10. Name and Address of New F	Registered Agent	
	9. Maine and Address of Con-		81	Name			
MARKE	ICCOEV M		82	Street Arid	ress (P.O. Box Number is Not Acceptat	nle)	
	Jeffrey N. : 163RD St		B2 Street Aod		JIBSS (F.O. BOX Milliber is Not Acceptancy		
ZU40 NE MIAMI FI			83				
MINIMIE	L 33102		84	City		85 Zip Code	
				,	oration submits this statement for the pu and of directors. I hereby accept the app	FL	
SIGNATURE _	Signatine, typed or peoble name of registered a OF LICERS (AND DIRECTORS	Note: Engineerd Apr. 13.	of Say at the region	ADDITIONS/CHANGES TO OF	DA'E ICERS AND DIRECTORS IN 12	
TITLE	DP	DELFIE	1 1 TITLE			Change Addition	
NAME	MARKS, JEFFREY N.		1.2 NAME			1	
STREET ADDRESS	2040 NE 163RD ST		. 13 STREE	T ADDRESS			
CITY - ST - ZIP	MIAMI FL	53.55.55	1 4 CITY -			Change Addition	
TITLE	DS	DELÉTE	2 1 1:1(E				
NAME	GEISMAR, LANCE		2.2 NAME	T ADDRESS			
STREFT ADDRESS	2040 NE 163RD ST		2 4 C(1Y-				
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	3 1 THLE			Change Addition	
NAME		_	3.2 NAMÉ				
STREET ADDRESS			33 SIRE	ET ACORESS			
CITY-ST-ZiP			3.4 CITY -			Change Addition	
TITLE		DELETE	4, 1 1111.6			□ c.tango □ radano	
NAME			4.2 NAME	1 ADDRESS		4	
STREET ADDRESS			4.4 CITY				
CITY - ST - ZIP		DELETE	5 1 TITLE			Change Additio	
NAME		_	5.2 NAME				
STREET ADDRESS			53 STRE	E1 ADDRESS			
CITY - ST - ZIP			5.4 CITY			Change C 4445	
TITLE		☐ DELFTE	6 1 111.			Change Addition	
NAME			62 NAM				
STREET ADDRESS				et address			
City St. 7iP			6.4 CiTY	- ST - ZIP			

14. If do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 carry, that I am an officer or director of the Lorporation 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 13/10 ungers, or on an attachment with an address

SIGNATURE AND VOID OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

(305)940-8652

Daytime Phone #

1/22/96