

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

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95 JUL 21 PM 2:49

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **L89994**

**(2)**

1. Corporate Name

~~THE ADLER COMPANIES~~

THE TAMMY COMPANIES, INC.

NOTE: Name change  
filed 3/24/95

600001545436  
-07/25/95--01063--011  
\*\*\*\*225.00 \*\*\*\*225.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 2601 SOUTH BAYSHORE DRIVE SUITE 1475 COCONUT GROVE FL 33133  
Mailing Address: 2601 SOUTH BAYSHORE DRIVE SUITE 1475 COCONUT GROVE FL 33133

3. Date Incorporated or Qualified: 07/30/1990  
3a. Date of Last Report: 05/19/1994  
4. FID Number: 65-0211100  
Applied For: Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
7. The Corporation has liability for responsible fire deaths in Florida Statutes:  Yes  No

2. Previous Place of Business: 21 State Apt # etc: 22 City & State: 23  
26. Mailing Address: 26 State Apt # etc: 27 City & State: 28  
24 City: 25 State: 29 City: 30 State:

9. Name and Address of Current Registered Agent  
\*ROBBINS, CHARLES D.  
~~2300 AMERIFIRST BLDG.~~  
ONE SE THIRD AVE.  
MIAMI FL

10. Name and Address of Now Registered Agent  
81 Name: Charles D. Robbins  
82 Street Address (P.O. Box Number is Not Acceptable): 2500 Sunbank International Center  
83 One S.E. Third Ave.  
84 Miami, FL FL 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. It is the policy of the State of Florida that a change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida and my office is located at the address stated above.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME: DP ADLER, IRWIN M. 12.2 STREET ADDRESS: 2601 S BAYSHORE DRIVE 12.3 CITY/STATE: MIAMI FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	13.1 NAME: DP David C. Adler 13.2 STREET ADDRESS: 2601 S Bayshore Drive 13.3 CITY/STATE: Miami, FL 33133	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12.4 NAME: DVS ADLER, DAVID C. 12.5 STREET ADDRESS: 2601 S BAYSHORE DRIVE 12.6 CITY/STATE: MIAMI FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	13.4 NAME: DV Irwin M. Adler 13.5 STREET ADDRESS: 2601 S Bayshore Drive 13.6 CITY/STATE: Miami, FL 33133	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12.7 NAME: V COLEMAN, JACQUELINE 12.8 STREET ADDRESS: 2601 S BAYSHORE DRIVE 12.9 CITY/STATE: MIAMI FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	13.7 NAME: VP T Luis Rabell 13.8 STREET ADDRESS: 2601 S Bayshore Drive 13.9 CITY/STATE: Miami, FL 33133	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 NAME: RABELL, LUIS 12.11 STREET ADDRESS: 2601 S BAYSHORE DRIVE 12.12 CITY/STATE: MIAMI FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	13.10 NAME: S Jacqueline Coleman 13.11 STREET ADDRESS: 2601 S. Bayshore Drive 13.12 CITY/STATE: Miami, FL 33133	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12.13 NAME: _____ 12.14 STREET ADDRESS: _____ 12.15 CITY/STATE: _____	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	13.13 NAME: ASec Charles D. Robbins 13.14 STREET ADDRESS: One S.E. 3rd Ave., 25th Floor 13.15 CITY/STATE: Miami, FL 33131	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information furnished with this filing is voluntarily furnished and that it is equally for the corporation stated to be true. I understand the Florida Statutes, Chapter 607, that the information furnished is the official report of the corporation's annual report to the State of Florida 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. If I am an officer or director, I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors of the corporation with an address.

SIGNATURE:   
SIGNATURE AND TITLE OF CURRENT NAME OF WORKING OFFICER OR DIRECTOR: David C. Adler, President  
6-12-95

