

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M00271

(0)

1. Corporation Name

TECTON, INC.

Tecton, Inc.

Principal Place of Business

4000 BRICKELL AVENUE 4TH FLOOR
MIAMI FL 33131

300 BISCAYNE BLVD. WAY
SUITE 1100
MIAMI, FL 33131

Mailing Address

TWO SOUTH UNIVERSITY DRIVE
SUITE 325
PLANTATION FL 33324-3307
US

300 BISCAYNE BLVD. WAY
SUITE 1100
MIAMI, FL 33131

2. Principal Place of Business

300 BISCAYNE BLVD. WAY
SUITE 1100

City & State

MIAMI, FL

Zip Country
33131

2a. Mailing Address

300 BISCAYNE BLVD. WAY
SUITE 1100

City & State

MIAMI, FL

Zip Country
33131

9. Name and Address of Current Registered Agent

FIRESTONE, GEORGE
TWO SO. UNIVERSITY DRIVE
SUITE 325
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
RICHARD P. MILLARD

82 Street Address (P.O. Box Number is Not Acceptable)
300 BISCAYNE BLVD. WAY

83 MIAMI, FLORIDA

84 City
MIAMI

33131

85 Zip Code
FL 33131

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, of 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME FIRESTONE, GEORGE
STREET ADDRESS 10414 BERMUDA DRIVE
CITY-ST-ZIP COOPER CITY FL ☒ DELETE

TITLE STD
NAME FIRESTONE, NOLA A.
STREET ADDRESS 10414 BERMUDA DRIVE
CITY-ST-ZIP COOPER CITY FL ☒ DELETE

TITLE P
NAME MILLARD, RICHARD P.
STREET ADDRESS 7481 CAMPO FLORIDA
CITY-ST-ZIP BOCA RATON FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition
000002221120--5
-06/24/97--01040--005
****173.75 ****173.75

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

4/23/97

FILED

97 JUN 23 AM 7:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (9/96)