

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

CORPORATION ANNUAL REPORT 1995

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



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
 95 JAN 17 AM 11:15

DOCUMENT # M66964 (1)

1. Corporation Name
BISCAYNE TENNIS, INC.

Principal Place of Business Mailing Address

% STEPHEN FEDERICO **% STEPHEN FEDERICO**
12733 BISCAYNE BLVD. **12733 BISCAYNE BLVD.**
N MIAMI FL 33181 **N MIAMI FL 33181**

2. Principal Place of Business 2a. Mailing Address

21 26

22 27

23 28

24 25 29 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/29/1988** 3a. Date of Last Report **04/20/1994**

4. FEI Number **65-0040305** 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 § 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

FEDERICO, STEPHEN
12733 BISCAYNE BLVD.
N MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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 _____

12. OFFICERS AND DIRECTORS

1 NAME **PD BOBSON, WILLIAM**

1 STREET ADDRESS **16471 N.E. 27 PLACE**

1 CITY, ST, ZIP **N MIAMI BCH FL**

2 NAME **STD FEDERICO, STEPHEN**

2 STREET ADDRESS **711 S.W. 113TH TERR**

2 CITY, ST, ZIP **PEMBROKE PINES FL**

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

3 NAME Change Addition

3 STREET ADDRESS

3 CITY, ST, ZIP

4 NAME Change Addition

4 STREET ADDRESS

4 CITY, ST, ZIP

5 NAME Change Addition

5 STREET ADDRESS

5 CITY, ST, ZIP

6 NAME Change Addition

6 STREET ADDRESS

6 CITY, ST, ZIP

7 NAME Change Addition

7 STREET ADDRESS

7 CITY, ST, ZIP

8 NAME Change Addition

8 STREET ADDRESS

8 CITY, ST, ZIP

14. I, the filer, certify that the information supplied with this filing is voluntarily furnished and true, not required, for the reporting stated in Section 199.032(1)(b), Florida Statutes. I further certify that the information with regard to the annual report or supplemental annual report is true and accurate and that my corporation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the manager or trustee empowered to cause this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of a changed or an original filing with an address.

SIGNATURE: _____ **STEPHAN FEDERICO** 1/11/95 303 841/1728
