FILE NOW: FILING FEE IS \$61. NONPROFIT CORPORATION ANNUAL REPORT			TMENT OF STATE 9. Mortham 1y of State		
DOCUN 1. Corporation	1996 MENT # N930 Name TTE CORPORATION	000004496 (6)			
Principal Place of Business Mailing Address 7740 SOUTHWEST 141ST STREET 7740 SOUTHWEST 141ST STREET MIAMI FL 33158 MIAMI FL 33158 US US					3a . Date of Last Report
				3. Date Incorporated or Qualified 10/05/1993	06/12/1995
2. Principal Pla 21	2. Principal Place of Business 2a. Mailing Address 26			4. FEI Number 65-0443041	Applied For Not Applicable
Suite, Apt. #	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
22 City & State 23		City & State		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes 🔲 No
	9. Name and Address of Cu		81 Name	10. Name and Address of New Re	gistered Agent
or register	ad agent or both in the State of	0502 and 617.1508, Florida Statute Florida. Such change was authorize Section 617.0503, Florida Statutes.	B4 City s, the above-named corpo d by the corporation's boa	ration submits this statement for the purp rd of directors. I hereby accept the appo	intment as registered agent. I am
12.	Signature, typed or printed name of registered OFFICERS	agent and title if applicable. (NOT S AND DIRECTORS	E Registered Agent signature require 13.	d when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	D NEARING, MICHAEL 7740 SOUTHWEST 141ST		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		CERS AND DIREC FORS IN 12
CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FL 33131 D ATLASS, FRANK 1 1300 SOUTHEAST 17TH		1.4 CHTY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
CITY - ST - ZIP TITLE NAME STREET ADDRESS	FORT LAUDERDALE FL 3 D WALLACE, JAMES 13120 SOUTHWEST 63RI	DELETE	2 4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FL 33156	DELETE	3.4. CitY - ST - ZiP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City, ST ZiB		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	L	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		Chançe Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		Change Addition
	t the information indicated on this 1 am an officer or director of the h Block 12 or Block 13 if manget		Ai report is true and accur e empowered to execute th ess.	for the exemption stated in Section 119. ate and that my signature shall have the his report as required by Chapter 617, Flo 41/25/96	