

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # N95000005216 (5)**

1. Corporation Name

**TSAKANIKAS US CONGRESS, INC.**



Principal Place of Business

Mailing Address

**4800 NW BOCA RATON BLVD.  
THE PLAZA, SUITE 2  
BOCA RATON FL 33431**

**4800 NW BOCA RATON BLVD.  
THE PLAZA, SUITE 2  
BOCA RATON FL 33431**

3. Date Incorporated or Qualified  
**11/03/1995**

3a. Date of Last Report  
**N/A**

2. Principal Place of Business

2a. Mailing Address

21 **4800 NW Boca Raton Blvd.**  
Suite, Apt. #, etc.

26 **4800 NW Boca Raton Blvd.**  
Suite, Apt. #, etc.

4. FEI Number

**65-0624999**

Applied For

Not Applicable

22 **The Plaza - Suite 2**  
City & State

27 **The Plaza - Suite 2**  
City & State

5. Certificate of Status Desired

**KX**

**\$8.75 Additional  
Fee Required**

23 **Boca Raton, FL**  
Zip Country

28 **Boca Raton, FL**  
Zip Country

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

24 **33431**

25 **U.S.A.**

29 **33431**

30 **U.S.A.**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TSAKANIKAS, PETER JAMES  
4800 NW BOCA RATON BLVD.  
THE PLAZA, SUITE 2  
BOCA RATON FL 33431**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **Candidate, District-19** ☐ DELETE  
NAME **Florida**  
STREET ADDRESS **Peter James Tsakanikas**  
CITY-ST-ZIP **4800 NW Boca Raton Blvd.  
Boca Raton, FL 33431**

TITLE **Treasurer** ☐ DELETE  
NAME **Peter James Tsakanikas**  
STREET ADDRESS **4800 NW Boca Raton Blvd.**  
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **Director** ☐ DELETE  
NAME **Robert Thomas, Jr.**  
STREET ADDRESS **4800 NW Boca Raton Blvd.**  
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **Director** ☐ DELETE  
NAME **Ines Arteche**  
STREET ADDRESS **4800 NW Boca Raton Blvd.**  
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

**800001820048**  
**-05/14/96--01037--021**  
**\*\*\*70.00**

**5-1-96**

14. I do hereby certify that the information supplied with this filing 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**Peter James Tsakanikas**

**4/22/96**

**(407) 367-0027**

CR2E037 (12/95)