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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P20800

(9)

1. Corporation Name
TBPOC INVESTOR, INC.

Principal Place of Business

200 SOUTH PARK RD.
SUITE 200
HOLLYWOOD FL 33021

Mailing Address

200 SOUTH PARK RD.
SUITE 200
HOLLYWOOD FL 33021-8541



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

09/07/1988

3a. Date of Last Report

04/30/1996

4. FEI Number

65-0065109

Applied For

Not Applicable

5. Certificate of Status Desired

XIXX

\$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 s. 199.032,
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

STOTZER, THEODORE R.
200 SOUTH PARK RD.
SUITE 200
HOLLYWOOD FL 33021

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12. TITLE

PD
NAME SWERDLOW, MICHAEL J.
STREET ADDRESS 200 SOUTH PARK RD #200
CITY-ST-ZIP HOLLYWOOD FL

13. TITLE

VS
NAME STOTZER, THEODORE R.
STREET ADDRESS 200 SOUTH PARK RD #200
CITY-ST-ZIP HOLLYWOOD FL

14. TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

15. TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

16. TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

17. TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 a receiver or trustee or person charged 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 as an attachment with an address.

SIGNATURE:

April 28, 1997 (954) 981-1000

CR2E034 (9/96)