

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P36817 (5)

1. Corporation Name

TL ACQUISITION CORP.



Principal Place of Business

Mailing Address

~~C/O HOLDING CAPITAL GROUP~~
104 CRANDON BLVD., #419
KEY BISCAYNE FL 33149

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104 CRANDON BLVD., #419
KEY BISCAYNE FL 33149

3. Date Incorporated or Qualified
12/26/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0293688

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 s. 199.032,
Florida Statutes ☒ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. *C/O Holding Capital Group, Inc.*
Suite, Apt. #, etc.

26. *C/O Holding Capital Group, Inc.*
Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. 25

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GALAN, MARIA J.
C/O HOLDING CAPITAL GROUP, INC.
104 CRANDON BLVD., #419
KEY BISCAYNE FL 33149

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 the corporation)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	DONAGHY, JAMES W.	104 CRANDON BL., #419	KEY BISCAYNE FL	<input type="checkbox"/>
VSTD	BROWN, DOUGLAS A.	1 DOGWOOD LN.	TENAFLY NJ	<input type="checkbox"/>
CD	HEALY, TIMOTHY F.	171 ACCABONAC ROAD	EAST HAMPTON NY	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	15 CHANGE	16 ADDITION
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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 607, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Douglas A. Brown
Vice Pres. Douglas A. Brown

4/25/96 (305) 361-8864
Date: Daytime Phone:

CR2E034 (12/95)