

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000008793 (1)

1. Corporation Name

TANHA, INC.



Principal Place of Business

9645 W. SAMPLE RD.
CORAL SPRINGS FL 33065
US

Mailing Address

9645 W SAMPLE RD
CORAL SPRINGS FL 33075
US

3. Date Incorporated or Qualified
11/30/1992

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number
65-0372274

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

9. Name and Address of Current Registered Agent

SOROKA, ARTHUR
9645 W. SAMPLE ROAD
CORAL SPRINGS FL 33065

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 607.0602 and 607.1503, 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, Street Address, City, State, and Zip)

Date (Month, Day, Year) (Agent's Signature and Date must be filed with this statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

SOROKA, ARTHUR

STREET ADDRESS

9645 W. SAMPLE ROAD
CORAL SPRINGS FL 33065

CITY - ST - ZIP

TITLE

VD

☐ DELETE

NAME

SOROKA, ARLETTA

STREET ADDRESS

9645 W. SAMPLE ROAD
CORAL SPRINGS FL 33065

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

☐ Change ☐ Addition

2. NAME

13. STREET ADDRESS

14. CITY - ST - ZIP

2. TITLE

☐ Change ☐ Addition

2. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

3. TITLE

☐ Change ☐ Addition

3. NAME

33. STREET ADDRESS

34. CITY - ST - ZIP

4. TITLE

☐ Change ☐ Addition

4. NAME

43. STREET ADDRESS

44. CITY - ST - ZIP

5. TITLE

☐ Change ☐ Addition

5. NAME

53. STREET ADDRESS

54. CITY - ST - ZIP

6. TITLE

☐ Change ☐ Addition

6. NAME

63. STREET ADDRESS

64. CITY - ST - ZIP

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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

X Arthur Soroka Arthur Soroka

5/22/96

386-7188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)