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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000006275 (0)

FILED Apr 18 1997 8:00am Secretary of State

TANNEX CORP. Principal Place of Business Mailing Address 7815 S.W. 84TH CT. 7815 S.W. 84TH CT.					
MIAMI FL 33143 MIAMI FL 33143-3737					
				3. Date Incorporated or Qualified 3a. D 01/22/1993 05	ate of Last Report /01/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite: Ap	nt # etc	Suite, Apt. #, etc.	**************************************	65-0390857	Not Applicable \$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & Sta	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Deserted	28		Trust Fund Contribution	Added to Fees
Zq)	Country 25	Zip 29	Country 30	B. This corporation has liability for intangible Florida Statutes Xes	e tax under s. 199.032, □ No
[24]	9. Name and Address of C		1301	10. Name and Address of New Registered	
GE	ELB, MONROE ESQ.		81 Name		
3400 S.W. 3RD AVE.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MI	AMI FL 33145				
			83		
			84 City	Fl	85 Zip Code
11. Pursuar	nt to the provisions of Sections 60	7.0502 and 607.1508. Florida Statu	tes, the above-named corr		changing its registered
Office of	r registered agent, or both, in the	State of Florida, Such change was	authorized by the corpora	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	pointment as registered
		obligations of, scotton out .0000, 1	ionida oraratos		
SIGNATURE	Styriative Type 4 or printed name of togister	ed agent and tille if applicable. (NO	TE Registered Agent's gnature requ		
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	The second se
TITLE	P MADOFUNO	☐ DELETE	1.1 TITLE		Change Addition
NAME	VEGA, MARCELINO 8 7815 SW 84 CT		1.2 NAME		
STREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS		
CHTY \$1 - ZIP	MINMIIL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME		L Descri	2.2 NAME		C straige C raction
STREET ADDRESS	e l		2.3 STREET ADDRESS		
CITY-ST-ZIP	*		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME	·	
STREET ADORESS	s		3.3 SYREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS	S		4 3 STREET ADDRESS		
CITY - ST - ZIP		T the ere	4.4 CITY-ST-ZIP		Change Addition
Unit		☐ DELETE	5.1 TITLE		Change Addition
NAME BENEFIT OF BENEFIT			5.2 NAME		
STREET ADDRESS	0		5.3 STREET ADDRESS		
CHY-S'-ZIP		DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition
Title		□"I D€T€1€	6.1 TITLE		THE CHANGE THE MORNING
NAME.			6.2 NAME		
STREET ADDRESS	22		6.3 STREET ADDRESS		
DITY-\$1-7/P	i		6.4 CITY - ST - ZIP		

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 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: MORELUNE LAS (MARGENNO VEGA)

4-12-97 (305)271-6610