FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300064953 (1)

BRAD TILLEM, P.A.

Principal Place of Business

10251 GREENHOUSE ROAD

SIGNATURE:

PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026-3255 3. Date Incorporated or Qualified 3a, Date of Last Report 09/13/1993 02/26/1996 4. FEI Number 2. Principal Prace of Business 2a. Mailing Address Applied For 65-0477746 21 26 Not Applicable Suite, Apl. #, etc. Surte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country This corporation has liability for intangible tax under s. 199.032, Bres □ No 30 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name TILLEM, BRAD 10251 GREENHOUSE ROAD **B2** Street Address (P.O. Box Number is Not Acceptable) **PEMBROKE PINES FL 33026** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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 larmitar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Slight renty and or prioled name of registers diagress and ole-diappholabic (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE ■ DELETE 1.1 TITLE Change Addition TILLEM, BRAD NAME 1.2 NAME 10251 GREENHOUSE ROAD STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33026 C-Tr-ST-7IP 1.4 City - \$1 - 7/2 DELETE TITLE Change Addition 2.1 TITLE NASAE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS C 1 - ST - 2IP 2. 4 CITY-ST-ZiP DELETE TIME 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CATY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS C Tr-ST-ZiP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDR: 55 5.3 STREET ADDRESS City - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 7/715 6.1 TITLE 8,444 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 supplierental 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 of changed, or on a state of the corporation of 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 of changed, or on a state of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FLORIDA DEPARTMENT OF STATE

Mailing Address 10251 GREENHOUSE ROAD

FILED Jan 28 1997 8:00am Secretary of State

- 1 (123 14 3 1 1 11 1 12 11 11 1	I DIN BANK		1810 I SUFF	#### # ## ##

(96/6)