SECOND N	NOTICE: CORPORATION WILL BE On or before 8/7/96: \$225 (If disso	DISSOLVED ON OR AFTER A	AUGUST 7, 1996. E to reinstate: \$375	s. 1	
	PROFIT	₹ FLORIDA DEPART		4	
	PORATION	4	Mortham		
ANNU	IAL REPORT	<i>74</i> 3	y of State		
1	1996	DIVISION OF C	ORPORATIONS		
DOCUN 1. Corporation	MENT # P93000	0074057 (9)			
TENEN	CONSULTING SYSTEMS, II	NC.		1 140 (1 PG) 110 10 10 1 (1) 0 1 1 0 1 1 1 1 1 1	ii Balli 1881: Sibis Bale: Bili 1881 1881
Principal Place of Business Mailing Address					
SUITE 112					
MIAMI FL 3315 US	j6	US		3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		10/18/1993 4. FEI Number	08/24/1995
1 8267	SWIZESS	26 Maining Address		65-0445210	Applied For Not Applicable
Suite, Apt. #	re 218	Suite. Apt. #, etc. 27			\$8.75 Additional Fee Required
City & State	arm, pu	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3315	Country 25 US 9. Name and Address of Current		Country 30	This corporation has lability for in Florida Statutes	Yes 🔀 No
TEM		i Megisterea Agent	81 Name	10. Name and Address of New Reg	Istered Agent
TENEN, STACEY 8261 SW 128TH ST. 82 Street Address (P.O. Box Number is Not Acceptable)					
SINTE 112 267 5				267 5W 128 St, SU	154 Z18
, MIAI	MI FL 33156		83		
:			84 City	niami	FL 85 Zip Code
11. Pursuant k	o the provisions of Sections 607.0502	and 607-1508, Florida Statutes	e the above named a	proporation pulposite this statement for the pul	vroce of observed its verial and
	n familiar with	tions of Section 607.0505, Flori	ida Statutes	oration's board of directors. Thereby accept	the appointment as registered
SIGNATURE 5	Signature, Type 1 Technique of contract anyone	- PAESIDENT Landing and come (NOTE	- Regulered Age disignature re	earned when renstrating	8/1/9L
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PD TENEN OTAGEN	DELETE	1.1 TUTLE	Po	Change Addition
NAME STREET ADDRESS	TENEN, STACEY 10528 SW 118TH PLACE		1.2 NAME	STALEY TENEN BY 167 3W 128 5 1	SUITE ZIA
CITY-ST-ZIP	MIAMI FL 33186	_	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	B267 3W 12651 13815	7
TITLE	V	DELETE	2 1 TITLE	Pulming pro zone	Change Addition
NAME	TENEN, KEITH	•	22 NAME		
STREET ADDRESS	%10528 SW 118TH PLACE		2 3 STREET ADDRESS		
CITY ST-ZIP TITLE	MIAMI FL 33186	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME			32 NAME		L
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHTV - ST - ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
STREET ADDRESS			4 2 NAME 4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST-ZIP		
TITLE	A	DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
DITY-ST-Z:P TITLE		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
NAME			62 NAME	50000192 -08/19/960102	15485°° - 22
STREET ADDRESS			6.3 STREET ADDRESS	***383.75	18- *999 のより
				ででかりりつ。 [つ	

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 trusted empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or Block 13 it hardened or an attachment with an address.

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED IN PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

9/1/96 705 256 0420 05 8/19/96