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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000082598 (2)

TAN MANAGEMENT, INC.

Principal Place of Business		Mailing Address		s teatismus in europ stint baint dairt musit euste tibes fittid ialêr eûlt loùt	
10691 N KEND SUITE 210 MIAMI FL 331	• •	10691 N KENDALL DRIVE SUITE 210 MIAMI FL 33176-1551			
				 Date Incorporated or Qualified 12/02/1993 	3a. Date of Last Report 01/25/1996
·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	EST MONTROSE STREET	26 782 WEST MONT	ROSE STREET	65-0454864	Not Applicable
Suite, Apt		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Regulred
	ONT, FL	City & State 28 CLERMONT, FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	
24 34711	25 U.S.A.	29 34711 30	U.S.A.		Yes No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Reg	jistered Agent
	W AGENTS, INC.		81 Name		
9100 S DADELAND BLVD SUITE 1707			82 Street Address (P.O. Box Number is Not Acceptable)		
	1E 1707 MI FL 33156		83		
MIC	MI FL 33130		63		
			84 City		85 Zip Code
Office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State c im familiar with, and accept the obligat	it Florida. Such change was auth	Yorized by the corpor	rporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
SIGNATURE.					
	Signature inquestion printed alamic of registered agent		egistered Agent signature req		DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
NAME	MCEWEN, TERRY C	Land Detect	1	MCEWEN, TERRY C.	Change Addition
STREET ADDRESS	10691 N KENDALL DRIVE, SUIT	F 210		11435 LANE PARK ROAD	
CITY - ST - ZIP	MIAMI FL 33176	2 2,0		TAYARES, FL 32778	
TITLE		DELETE	1 4 CITY-ST-ZIP 2 1 TITLE	TATAKES, 12 32776	Change Addition
NAME			22 NAME		C Annual C Montain
STREET ADORESS			2 3 STREET ADDRESS	, •	
CITY ST-Z-2			2. 4 CITY+ST-ZIP	•	
TITLE		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		•
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-7P			3 4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME:			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHTY-ST-ZIP			4.4 CITY - ST - ZIP		
FITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY: ST: ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 T(TLE		Change Addition
NAME			6.2 NAME		

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 informal on 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 panged or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(352) 242-2335

FILED

Feb 10 1997 8:00am

Secretary of State