FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 2:34

DOCUMENT # **P94000030549 (7)**

T.A.D. ENTERPRISES, INC.

Principal Place of Business	Mailing Address
8177 GLADES RD. BOCA RATON FL 33434	8177 GLADES RD. BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/19/1994

3a. Date of Last Report:

4. FEI Number: 65-0496149 ☐ 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

2. Principal Place of Business / 2a. Mailing Address: (21–30 blank)

9. Name and Address of Current Registered Agent

GAYLORD, MARC R ESQ.
4800 N. FEDERAL HWY.
SUITE 306B
BOCA RATON FL 33431

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 607.0502 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	D
Name	MUCHA, OFER
Street Address	5705 N.W. 32ND TERRACE
City-St-Zip	BOCA RATON FL 33496
Title	D
Name	MUCHA, NAOMI
Street Address	5705 N.W. 32ND TERRACE
City-St-Zip	BOCA RATON FL 33496

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (blank)

REMITTED BY MAY 1

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)(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: Naomi Mucha NAOMI MUCHA secy. sec'y. 2/22/95 407-852-1214

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0262729 CP