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 # **P94000036654 (9)**

T. C. Q. CONTROL, INC.

STREET ADDRESS

Principal Plac		Mailing Address			
B33 N. NORTH LAKE DR 833 N. NORTH L HOLLYWOOD FL 33019 HOLLYWOOD FL			1		
				3. Date Incorporated or Qualified 05/11/1994	3s. Date of Last Report 02/02/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite. Apt.		Suite, Apt. #, etc.		65-049 1983	Not Applicable
22 Suile. Apt.	#, EtC.	27 Soile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	9. Name and Address of Currer		30	Florida Statutes 10. Name and Address of New Reg	Yes No
MEC	CKE, CARL J	in magnetor or region.	81 Name	10, man and modern and man	
6714 LIGHT VILLOOD BLVD				ress (P.O. Box Number is Not Acceptable	(a)
HOLLYWOOD FL 33024			51 eet Addi	ress (F.O. Box Nomber is Not Acceptable	(6)
			83		
			84 City		85 Zip Code
	0.70	0 1007 4000 51 4 0			FL 85 ZIP Code
office or r agent La	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was a attions of, Section 607.0505, Flo	uthorized by the corporation of	poration submits this statement for the pition's board of directors. I hereby acception	t the appointment as registered
SIGNATURE	<u> </u>	Best a	:: Registered Agent signature requir		DATE
12.	Signature Typed or princed harve of registered agr OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THLE	PD	☐ DELETE	11 TITLE		Change Addition
NAME	HERNANDEZ, ORLANDO		1.2 NAME		
STREET ADDRESS	833 N. NORTH LAKE DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33019		1.4 CITY-ST-ZIP		
TITLE	D HEOMANDEZ MILMA	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HERNANDEZ, WILMA 833 N. NORTH LAKE DR		2.2 NAME		
STREET ADDRESS CITY-ST-ZIP	HOLLYWOOD FL 33019		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	CUDLIN, WILMA	_	32 NAME		. —
STREET ADDRESS	833 N. NORTH LAKE DR		3.3 STREET ADDRESS		
City - St - ZiP	HOLLYWOOD FL 33019		3.4. CITY - ST - 21P		
TOLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAMÉ			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - S1 - ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITUE NAME			5 1 TITLE 52 NAME		C change C Modition
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		ļ
TITLE		DELETE	61 TITLE	·	Change Addition
NAME			6.2 NAME		-

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

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

FILED

Jan 28 1997 8:00am

Secretary of State