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May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000046647 (1)**

1. Corporation Name

TEMPLE & CHURCH ASSOCIATES, INC.

Principal Place of Business

**4815 NW 79TH AVE
STE #15
MIAMI FL 33166
US**

Mailing Address

**P O BOX 521872
MIAMI FL 33152-1872**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/22/1994

4. FEI Number

65-0519545

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **2305 N.W 107th AVE**

26 Suite, Apt. #, etc.

22 **SUITE 1M18, BOX-47**

27 Suite, Apt. #, etc.

23 **MIAMI, Florida**

28 City & State

24 **33172** 25 **USA**

29 Zip Country

9. Name and Address of Current Registered Agent

**PELLISSERY, JEROME J
9020 NW 8TH ST
SUITE 417
MIAMI FL 33172**

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.

04.30.1998

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PM**
STREET ADDRESS **PELLISSERY, JEROME J**
CITY-ST-ZIP **9020 NW 8TH STREET, SUITE 417**
MIAMI FL

TITLE ☐ DELETE
NAME **VD**
STREET ADDRESS **MADHAVAN, SETU**
CITY-ST-ZIP **MARSHALLS WARE HOUSE**
CAY BAY ST

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **PELLISSERY, STALIN JOSE**
CITY-ST-ZIP **MAIN ROAD CHALAKUDY KERALA STATE**
KERALA STATE INDIA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **PM**
1.3 STREET ADDRESS **PELLISSERY, JEROME J**
1.4 CITY-ST-ZIP **1483 ESTANCIA CIR**
WESTON, FL 33327

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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.

SIGNATURE:

JEROME J. PELLISSERY

04.30.1998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0214471

CR2E034 (10/97)