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Jan 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000049277 (4)

1. Corporation Name

TEEN TOURS OF AMERICA, INC.



Principal Place of Business

21440 MILLBROOK CT
BOCA RATON FL 33498

Mailing Address

21440 MILLBROOK CT
BOCA RATON FL 33498-1919

3. Date Incorporated or Qualified
07/01/1994

3a. Date of Last Report
04/09/1996

2. Principal Place of Business

21 1121 Holland DRIVE

Suite, Apt. #, etc.

BAY # 7

City & State

23 BOCA RATON FLORIDA

Zip

24 33487

Country

25 USA

2a. Mailing Address

26 1121 Holland DRIVE

Suite, Apt. #, etc.

BAY # 7

City & State

28 BOCA RATON FL

Zip

29 33487

Country

30 USA

4. FEI Number

65-0509028

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

9. Name and Address of Current Registered Agent

LENNER, ROBERT S
21440 MILLBROOK CT
BOCA RATON FL 33498

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1121 HOLLAND DRIVE

83

BAY # 7

84 City

BOCA RATON

FL

85

Zip Code

33487

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

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

ROBERT S. LENNER

(NOTE: Registered Agent signature required when reinstating)

DATE

1/4/97

12. OFFICERS AND DIRECTORS

TITLE PDS
NAME LENNER, ROBERT S
STREET ADDRESS 21440 MILLBROOK CT
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE D
NAME LENNER, HEIDI
STREET ADDRESS 21440 MILLBROOK CT
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/4/97

(561) 998-0102

CR2E034 (9/96)