FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 2:06

DOCUMENT # P94000062442 (6)

1. Corporation Name
TIEKCAN HOLDINGS US INC.

Principal Place of Business	Mailing Address
811 N.E. 199TH STREET MIAMI FL 33179	811 N.E. 199TH STREET MIAMI FL 33179

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/24/1994
3a. Date of Last Report: N/A

21	2. Principal Place of Business: 311 BUTTONWOOD CIRCLE	2a. Mailing Address: 311 BUTTONWOOD CIRCLE	4. FEI Number: 65-0515184 ☐ Applied For ☐ Not Applicable
22	Suite, Apt. #, etc.: [redacted] SUITE "A"	27 Suite, Apt. #, etc.: [redacted] SUITE "A".	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
23	City & State: KEY LARGO	28 City & State: FLORIDA.	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
24	Zip: 33037 25 County: U.S.A.	29 Zip: 33037 30 County: U.S.A.	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

BORGERINK, PAUL N
811 N.E. 199TH STREET
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name: BORGERINK, PAUL. N.
82 Street Address (P.O. Box Number is Not Acceptable): [redacted] ST. [redacted].
83 311 BUTTONWOOD CIRCLE SUITE "A"
84 City: KEY LARGO FL 85 Zip Code: 33037.

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: _____ (NOTE: Registered Agent's signature required if either is changed) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☑ Change ☐ Addition
NAME	BORGERINK, PAUL N	12 NAME	
STREET ADDRESS	811 N.E. 199TH STREET	13 STREET ADDRESS	311 BUTTONWOOD CIRCLE SUITE "A"
CITY ST ZIP	MIAMI FL 33179	14 CITY ST ZIP	KEY LARGO, FL. 33037.
TITLE	SVD	21 TITLE	☑ Change ☐ Addition
NAME	BORGERINK, BERT N	22 NAME	NOT A DIRECTOR/OR
STREET ADDRESS	811 N.E. 199TH STREET	23 STREET ADDRESS	OFFICER OF CORPORATION ANYMORE.
CITY ST ZIP	MIAMI FL 33179	24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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: P.N. (PAUL) BORGERINK. JAN 95 (305) - 297-8724.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0196434 CP