

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 29 AM 8:43

DOCUMENT # P94000068482 (6)

1. Corporation Name
C.D. TUCKER ASSOCIATES, INC.

Principal Place of Business Mailing Address
920 SW 131ST AVE 920 SW 131ST AVE
DAVIE FL 33325 DAVIE FL 33325

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
09/16/1994

2. Principal Place of Business 2a. Mailing Address
21 **1876 N. University Dr.** 2b

Suite, Apt. #, etc. Suits, Apt. #, etc.
22 **Suite # 307** 27

City & State City & State
23 **PLANTATION, FL.** 28

Zip Country Zip Country
24 **33322-4126** 25 **BROWARD** 29 30

4. FEI Number Applied For
65-052-1197 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

10. Name and Address of New Registered Agent

DEPACE, GERALD P
513 N STATE ROAD 7
MARGATE FL 33063

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City 85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0402 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]* DATE: **June 12, 1995**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **D/President**
NAME: **TUCKER, CHARLES D**
STREET ADDRESS: **117 LAKE EMERALD DR #410**
CITY ST ZIP: **FT LAUDERDALE FL 33309**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

TITLE: **D/Secretary**
NAME: **DEPACE, GERALD P**
STREET ADDRESS: **117 LAKE EMERALD DR #410**
CITY ST ZIP: **FT LAUDERDALE FL 33309**

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE: **D**
NAME: **LEIBOWITZ, MARVIN L**
STREET ADDRESS: **920 SW 131ST AVE**
CITY ST ZIP: **DAVIE FL 33325**

31 TITLE Change Addition
32 NAME: **LEIBOWITZ, MARVIN L**
33 STREET ADDRESS: **1623 N.E. 8th Ave. #5**
34 CITY - ST - ZIP: **FT. LAUDERDALE, FL. 33305**

TITLE: NAME: STREET ADDRESS: CITY ST ZIP:

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE: NAME: STREET ADDRESS: CITY ST ZIP:

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE: NAME: STREET ADDRESS: CITY ST ZIP:

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
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)(k), 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]* **CHARLES D. TUCKER, Pres. 6/8/95 (305) 452-2020**