FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

MIAMI FL 33131



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076125 (1)

TANCO REAL ESTATE CO., INC.

Principal Place of Business Mailing Address 5481 ROYAL PALM BEACH BLVD 5481 ROYAL PALM BEACH BLVD ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411-8815 3a. Date of Last Report 3. Date Incorporated or Qualified 10/14/1994 02/27/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0530890 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country $Z_{\rm IP}$ Country This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TANEN. JEFFREY S 2. S. BISCAYNE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 3250**

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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

83 84 Crty

SIGNATURE (NOTE: Registered Agont signature required when reinstating) Signature, typed or proted name of regalered agent and the if applicable (96/6) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE 1.1 TITLE Addition TITLE TANEN, BARBARA NAME 12 NAME 5481 ROYAL PALM BEACH BLVD 1.3 STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL CITY-ST-ZIP 1.4 City-Sf-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 3 1 TITLE Change Addition 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY+ST-ZIF DELETÉ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - S1 - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 THUE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 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.

FILED

Jan 14 1997 8:00am

Secretary of State

Applied For

85

Zip Code

Not Applicable