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FILED
May 08 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 # P94000080383 (0)

1. Corporation Name

TRU-CD, INC.

Principal Place of Business

11415 S DIXIE HWY SUITE 200
MIAMI FL 33156

Mailing Address

11415 S DIXIE HWY SUITE 200
MIAMI FL 33156-4443

3. Date Incorporated or Qualified

11/02/1994

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

65-0531838

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

BROWN, RICHARD
9350 S DIXIE HWY SUITE 950
MIAMI FL 33156

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.

SIGNATURE

Richard Brown, CPA

Signature of principal or person named or registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

D
NAME PAULL, LARRY
STREET ADDRESS 2902 N STATE ROAD 7
CITY-ST-ZIP LAUDERDALE LAKES FL 33313

1.2 TITLE ☐ DELETE

D
NAME ROMANO, LOU
STREET ADDRESS 11415 S DIXIE HWY SUITE 200
CITY-ST-ZIP MIAMI FL 33156

1.3 TITLE ☐ DELETE

1.4 TITLE

1.5 NAME

1.6 STREET ADDRESS

1.7 CITY-ST-ZIP

1.8 TITLE

1.9 NAME

1.10 STREET ADDRESS

1.11 CITY-ST-ZIP

1.12 TITLE

1.13 NAME

1.14 STREET ADDRESS

1.15 CITY-ST-ZIP

1.16 TITLE

1.17 NAME

1.18 STREET ADDRESS

1.19 CITY-ST-ZIP

1.20 TITLE

1.21 NAME

1.22 STREET ADDRESS

1.23 CITY-ST-ZIP

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:

Richard Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)