

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 21 PM 3:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000086244 (8)

1. Corporation Name
TANDEMIA, INC.

Principal Place of Business
717 S. US HIGHWAY ONE #1012
JUPITER FL 33477

Mailing Address
717 S. US HIGHWAY ONE #1012
JUPITER FL 33477

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/28/1994
3a. Date of Last Report: 7/a

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 1800 Embassy Drive		26 1800 Embassy Drive		65-0503229		Not Applicable	
Suite, Apt. #, etc.:		Suite, Apt. #, etc.:		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
22 120		27 120		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
23 West Palm Beach, FL		28 West Palm Beach, FL					
Zip	Country	Zip	Country				
24 33401	25 USA	29 33401	30 USA				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SMITH, AMY 717 S. US HIGHWAY ONE #1012 JUPITER FL 33477				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				1800 Embassy Drive #120			
				83			
				84 City		85 Zip Code	
				WEST PALM BEACH		FL 33401	

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: Amy L. Smith AMY L. SMITH DATE: 4-18-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-registering) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, AMY	12 NAME	
STREET ADDRESS	717 S. US HIGHWAY ONE #1012	13 STREET ADDRESS	1800 EMBASSY DRIVE #120
CITY - ST - ZIP	JUPITER FL 33477	14 CITY - ST - ZIP	WEST PALM BEACH, FL 33401
TITLE	D	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DODGIN, PATRICK	22 NAME	
STREET ADDRESS	717 S. US HIGHWAY ONE #1012	23 STREET ADDRESS	1800 EMBASSY DRIVE #120
CITY - ST - ZIP	JUPITER FL 33477	24 CITY - ST - ZIP	WEST PALM BEACH, FL 33401
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(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: Amy L. Smith AMY L. SMITH DATE: 4-18-95 407 689-6700
(Signature, typed or printed name of signing officer or director) (Date) (Typed Name)