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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400093588 (9)

DOUBLE T BOBCAT, INC.

Principal Place of Business

Mailing Address

## FILED Apr 29 1997 8:00am Secretary of State



3779 SW 17 ST FT LAUDERDALE FL 33312		3779 SW 17 ST FT LAUDERDALE FL 3	3312-3526								
						Date Incorporated or Qualified     12/28/1994	3a. Date of Last Fleport 04/17/1996				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 65-0548597	Applied For Not Applicable				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional				
22		27				3. Certificate of Status Desired	Fee Required				
City & State	в	City & State	28			Election Campaign Financing     Trust Fund Contribution	П	\$5.00 May Be Added to Fees			
Ζίρ <b>24</b>	Country	Ζφ	<u> </u>	untry		8. This corporation has liability for intangible tax under s. 199.032,					
24	9, Name and Address of Cur	29 rent Registered Agent	30	Τ.		Florida Statutes  10. Name and Address of New Reg					
TOR	IBIO, ANTHONY			81	Name			•			
	9 SW 17 ST		82 Sti			eet Address (P.O. Box Number is Not Acceptable)					
FIL	AUDERDALE FL 33312		83								
								TT-			
				84	City		FL	85	Zip C	ode	
11. Pursuant office or r	to the provisions of Sections 607.0 egistered agent, or both, in the St	0502 and 607.1508, Florida State of Florida Suate of Florida. Such change w	atutes, the a as authorize	bove d by	e-named co the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of t the appo	chang	ing its	registered egistered	
	m familiar with, and accept the ob	oligations of, Section 607.0505	, Florida Sta	tutes	S.						
SIGNATURE	Signature, typed or printed name of registered	agent and tile if applicable.	(NO11 : Registere	d Age	ent signature req	uired when reinstating)	DATE				
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND				
TITLE	TORIBIO, ANTHONY	DELETE						Cha	inge	Addition	
NAME Street address	3779 SW 17 ST		1.2 N		ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL			1.3 STREET ADDRESS 1.4 City-St-Zip							
TITLE		☐ DELETE	2.17					Chá	inge	Addition	
NAME			2.2 NA			•					
STREET ADDRESS			2.3 S	1REE1	ADDRESS						
CITY-ST-ZIP	<del></del>			2 4 CITY - S1 - ZIP							
TITLE		☐ DELETE						Cha	inge	Addition	
NAME Street address			3.2 N		PDDDECO						
CITY-ST-ZIP					ADDRESS						
TITLE		☐ DELETE		3.4. CITY - ST - ZIP 4.1 TITLE				Cha	nae	Addition	
NAME			4. 2 NA							_	
STREET ADDRESS			4.3 S	IREET	ADDRESS						
CITY-ST-ZIP			4.4 0	HY-S	1 - ZIP				·····		
TITLE				5.1 TITLE			1	Cha	inge	Addition	
NAME			5.2 N		_ [						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP TITLE		DELETE	5.4 C		T-ZIP			☐ Cha	เกตะ	Addition	
NAME		present	6.2 N						go	round)	
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	<u> </u>			HTY-S							

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 copplemental annual proof 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 truefly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapters or on an attacker and fivily an address.

4-21-9-