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

Mailing Address 4310 SHERIDAN ST.

2ND FLOOR

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

4310 SHERIDAN ST. 2ND FLOOR

THLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-SI-7-2

CiTY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500000552 (6)

T. B. L. INVESTMENTS, INC.

HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-3512 3. Date Incorporated or Qualified 3a. Date of Last Report 01/04/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0545731 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes \square No Country Zip 30 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B**1 Name **BURTON, ANDRE \$** 4310 SHERIDAN STREET #202 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signatine type dio pointed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. ___ DELETE Change Addition 1.1 TITLE TITLE MCDONALD, CATHLENE CR2E034 1.2 NAME NAME 4310 SHERIDAN ST. #202 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 1.4 City - ST - ZIP CHY- \$1-7:9 DELETE Change Addition 2.1 TITLE MAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CiTY-ST-ZiP CHY-ST-ZP DELETE Change Addition 3.1 TITLE TIME NAM: 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY- \$1-205

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 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.

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

DELETE

DELETE

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X4/28/97 X438-443

Change

Change

Addition

Addition

FILED

May 07 1997 8:00am

Secretary of State