

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000002351 (1)

1. Corporation Name

TEM GROUP, INC.



Principal Place of Business

2701 WEST WATERS AVENUE, UNIT 1003
TAMPA FL 33614

Mailing Address

2701 WEST WATERS AVENUE, UNIT 1003
TAMPA FL 33614

2. Principal Place of Business

21 7517 VEVE LANE

Suite, Apt. #, etc.

22 City & State

23 TAMPA, FLA

24 Zip

33610

25 Country

USA

2a. Mailing Address

26 702 E. 122ND AVE.

Suite, Apt. #, etc.

27 City & State

28 TAMPA FLORIDA

29 Zip

33612

30 Country

USA

3. Date Incorporated or Qualified

01/10/1995

3a. Date of Last Report

4. FEI Number

59-3288343

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

AMERILAWYER

343 ALMERIA AVENUE

CORAL GABLES FL 33134

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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
NAME CURTISS, THOMAS
STREET ADDRESS 2701 WEST WATERS AVENUE, UNIT 1003
CITY-ST-ZIP TAMPA FL 33614

TITLE ☐ DELETE

S
NAME EUGENE BROWDER
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

S
NAME EUGENE BROWDER
STREET ADDRESS 702 E. 122ND AVE.
CITY-ST-ZIP TAMPA, FLA 33612

TITLE ☐ DELETE

T
NAME MICHAEL CURTISS
STREET ADDRESS 15905 EAGLE RIVER WAY
CITY-ST-ZIP TAMPA FLA. 33624

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

P
1.1 TITLE CURTISS, THOMAS
1.2 NAME 7517 VEVE LANE
1.3 STREET ADDRESS TAMPA FLA. 33610
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

S
2.2 NAME EUGENE BROWDER
2.3 STREET ADDRESS 702 E. 122ND AVE
2.4 CITY-ST-ZIP TAMPA FLA. 33612

3.1 TITLE ☐ Change ☐ Addition

T
3.2 NAME MICHAEL CURTISS
3.3 STREET ADDRESS 15905 EAGLE RIVER WAY
3.4 CITY-ST-ZIP TAMPA FLA. 33624

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 400001836354
5.3 STREET ADDRESS -05/23/96--01018--007
5.4 CITY-ST-ZIP ***225.00

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 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: THOMAS SCOTT CURTISS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/96

Date

813-238-7405

Daytime Phone

CR2E034 (12/95)