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

PROFIT CORPORATION **ANNUAL REPORT**



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

1996

P95000059577 (3)

DOCUMENT # 1. Corporation Name TAMCO, INC.

FILED Apr 24 1996 8:00 am Secretary of State



Principal Place of Business 2623 221ST STREET EAST BRADENTON FL 34202		Mailing Address		e samineer inn samhr abstis abtili david datibl dasibl dasibl dasibl dasibl folis (CE) (EE)	
		2623 221ST STREET EAST BRADENTON FL 34202			
2 Principal P	flace of Business			3. Date incorporated or Qualified 08/02/1995	3a. Date of Last Report
21	ided of Edsiriess	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26		65-0599691	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for in	Added to Fees
24	25	29	30	Florida Statutes Yes	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	
343 ALI Coral	W FIRM OF LAWRENCE J SPI MERIA AVENUE GABLES FL 33134		83 84 City	TAMMY A. STEWA diress (P.O. Box Number is Not Acceptable 2623 2213 STREE BRADENTON F BRADENTON	1) ET E. L 34202 85 Zip Code
or register familiar wit	o the provisions of Sections 607.056 od agent, or both, in the State of Floch, and accept the obligations of, Section 1997 of the state of section 1997 of the section	2) I HIMM	i n, diewata	xiration submits this statement for the purporard of directors. I hereby accept the appoint	ose of changing its registered office of the registered agent. I am
12.	OFFICERS A	ND DIRECTORS	IOTE: Registered Agent signature requi		DATE
THILE	PSTD	☐ DELETE	1. 1 TITLE	ADDITIONS/CHANGES TO OFFIC	
NAME	Stewart, tammy a		1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	2623 221ST STREET EAST		1.3 STREET ADDRESS		j
CITY-ST-ZIP	BRADENTON FL 34202		14 CITY-ST-ZIP		
TITLE		☐ DELETE	2 1 TITLE		Change Addition
NAME			2 2 NAME		Colonide D Madibal
STREET ADDRESS			2 3 STREET ADDRESS		}
CITY-ST-ZIP			2 4 City - St - ZiP		
TITLE		DELETE	3. 1 TITLE		Change Addition
NAME			3.2 NAME		C over the C vice vice.
STREET ADDRESS			3.3. STREET ADDRESS		i
CITY-ST-ZIP			3 4 CITY - ST - ZIP		
TITLE		□ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
THUE		☐ DELETE	5 1 TITLE		Change Addition
NAME OTOGEN LEBESSON			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-S1-ZIP			5.4 City - St - Zip		1
TRILE		DELETE	6. 1 TITLE		Change Addition
NAM!			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	codificilizat the left		6 4 CITY - ST - ZIP		İ
certify that t	opuny mat me miormation supplied the information indicated on this appli	With this filing is voluntarily furn	ished and does not qualify f	for the exemption stated in Section 119.07(3)(k). Florida Statutes Lfurther

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. I further 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