SECOND MOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1:106.

AMOUNT DUE ON OR REFORE 1/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$378.)

PROFIT CORPORATION ANNUAL REPORT -



FLORIDA DEPARTMENT OF STATE
Sandra de Moderner
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P95000068525 (1)

TFC OF FORT LAUDERDALE, INC.

APPROVED FILED

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

ALLAHASSEE. FLORIDA

					
incipal Place	of Business IST 6TH STREET 7TH FLOOR	Mailing Address 110 SOUTHEAST 6TH ST	REET YOU FLOOR		
FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301					
				3. Date incorporated or Qualified Se. Date of Last Report 99/01/1995	
Principal Pla	ace of Business	2a. Mailing Address	101	4. FEI Number	
28 1001 Dea Suite, Apt. #, etc. Suite, Apt. #, etc.			Kood	65-0607839 Not Applicable	
Suite, Apt. #	, elc.	27		5. Certificate of Status Desired 55.75 Additional Fee Required	
City & State	,	City & State	NJ	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country 25	20 077/2	Country 30	This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No No	
	9. Name and Address of Cut		30	10. Name and Address of New Registered Agent	
CARNEY, DAVID			\$1 Name		
			\$2 Street Add	ress (P.O. Box Number is Not Acceptable)	
	MI FL 33131		Stroot Add	Street Address (F.C. DOX Number is 140t Acceptable)	
-			83		
			84 City	■	
	^	\sim			
agent. I an	n familia/ with and accept the ob	oligations of, Section 607.0595, Flor	rida Statutes.	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
SNATURE :	Signature, typed to printed sums of registration	d agent and life if applicable. (NOTE	E: Hegistared Agent eignaturé réqui	(O)DHALL DATE	
SNATURE :	Signaturi, typed or pretect arms of registry. OFFICIALS		E: Hegistered Agent signature requi	1012400 A MARKET A MARKET	
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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, 1 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 617; Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SICSWUTNERSCOURE

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