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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED Jan 15 1998 8:00am Secretary of State

1. Corporatio		0012112 (0)					
TAMCO ASSOCIATES, INC.							
					I ANGELT DE SEM COLOT METER DO LE MORE DO LE	3 (11) 1 (11) 12 (11) 11 (11) 12 (13) 13 (14)	1211
Principal Place of Business Mailing Address				-		90111 E010 35005 31911 10819 1101	1111
P∩wc∩ W/PAIJ	IETTO PARK DRIVE SUITE 375	7040 W PALMETTO PARK	ORIVE SHE	re 375			
BOCA RATON FL 33433 BOCA RATON FL 33433				12 0/0			
					DO NOT WRITE II	N THIS SPACE	
					3. Date incorporated or Qualified		ļ
					09/19/1995		
<u> </u>	face of Business	2a. Mailing Address		4. FEI Number	Applied	For	
		26			65-06 16364	Not App	olicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired	☐ \$8.75 Additi	
22 27						Fee Require	:d
City & State	•	City & State		6. Election Campaign Financing	\$5.00 May		
23	1 2	Zip Country			Added to Fee		
Zip				У	8. This corporation owes or has paid		ole
24	25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30		
		r Registered Agent	81	Nessa	10. Name and Address of New Regi	stered Agent	
MAURER, JANI E							
1489 W PALMETTO PARK ROAD SUITE 440				Street Addre	ss (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33431			<u> </u>	ļ			
			83	1			- [
			84	City		85 Zip Code	
				"]- <u>L</u>	
11. Pursuant 1	o the provisions of Sections 607,0502	and 607.1508, Florida Statute	e-named corpo	ration submits this statement for the pur on's board of directors. I hereby accept to	pose of changing its regi	stered	
agent. La	egistered agent, or both, in the State (m familiar with, and accept the obliga	of Florida, Such change was a tions of, Section 607,0505, Fic	rida Statute	y the corporations.	on's poard of directors, I hereby accept to	ne appointment as regis:	terea
SIGNATURE	3						İ
- SIGNATORIE	Signature, typed or printed name of registered agen	t and little if applicable. (NOTE	: Registered Ag	ent signature required	when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN	12
TITLE	VTD	☐ DELETE	1.1 TITLE	f		LI Change L	Addition
NAME	TAMACCIO, ANTHONY V		1.2 NAME				
STREET ADDRESS	7955 VILLA NOVA DRIVE		1.3 STREET	T ADDRESS			L)
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY - S	ST-ZIP			
TITLE	PSD	DELETE	21 TITLE			☐ Change ☐	Addition
NAME	TAMACCIO, MICHAEL		2.2 NAME				
STREET ADDRESS	3641 NW 24 TERRACE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33431		2. 4 CITY -	ST-ZIP			
TITLE		DELETE 3.17				Change	Addition
NAME			3.2 NAME				1
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP	- ZIP		3.4. CITY-	ST-ZiP			
TITLE	·····	DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADORESS			1
CITY-ST-ZIP			4.4 City-ST-ZIP				- 1
TITLE	······································	DELETE	5.1 TITLE			Change .	Addition
NAME			5.2 NAME	ļ			
STREET ADDRESS				Anness			- \
!			5 3 STREET ADORESS				
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - S	51-ZIP		Change	Addition
			6.1 TITLE			L Grange L!	
NAME			6.2 NAME	+DD0500			1
STREET ADORESS			6.3 STREET				
CITY-ST-ZIP 6 14. I hereby certify that the information supplied with this filing does not qualify for the				T-ZIP	ection 119 07/3)(i) Florida Statutos 1 fue	ther certify that the inform	nation
· · · · · · · · · · · · · · · · · ·	orang anal and innormation aupplied with	and ming area not qualify to	· • • • • • voinh	and and and	course i rever (e)(i), i lorida elatotes, filli	are county material mitter	, .au. VII

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.