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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 21 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #
1. Corporation Name

Principal Place of Business

P96000009381 (0)

Mailing Address

TUCHMAN & BROWN INVESTMENT, INC. NO. 2

53 DUNBAR RD PALM BEACH GARDENS FL 33418 US		53 DUNBAR RD PALM BEACH GARDENS FL 3341B US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/30/1996		
<u> </u>	Place of Business	2a. Mailing Address	Mailing Address		4. FEI Number	Applied For
21		26		65-0642175	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	├ ─ '		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Z(p	Country 30		8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No	
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent
BROWN, JEFFREY B			81	Name		
53	DUNBAR RD		82	Street A	ddress (P.O. Box Number is Not Acceptable)	
PALM BEACH GARDENS FL 33418						
			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 add accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE						
	Signatur year of project on amendative sistem as			nt signature re	oquired when reinstating) DATE	D D.
12.	STD STD	ND DIRECTORS DELETE	13. 1.1 TITLE	T	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	BROWN, JEFFREY B	beeck	1.2 NAME	- 1		C Change C Addition
STREET ADDRESS			1.3 STREET	ADDRESS		
CITY-ST-ZIP	BALL OF ALL CAPPELLO FOR COLLEGE		1.4 CITY - S			
THILE	D	DELETE	2.1 TITLE			Change Addition
NAME	BROWN, NANCY R		2.2 NAME			
STREET ADDRESS	53 DUNBAR ROAD		2.3 STREET	ADDRESS		
CITY-ST-ZIP	T-ZIP PALM BEACH GARDENS FL 33418			ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE			Change Addition
NAME	TUCHMAN, MICHAEL M		3 2 NAME			ļ
STREET ADDRESS	72 DUNBAR ROAD		3 3 STREET	ADDRESS		
CITY+ST-ZIP	PALM BEACH GARDENS FL		3.4. CITY-5	ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE			Change Addition
NAME	TUCHMAN, CAROL M		4.2 NAME	ļ		
STREET ADDRESS	- 1		4.3 STREET	ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418		4.4 CITY - S	1 - ZIP		[] Ob
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	}		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S 6.1 TITLE	1-ZIP		Change Addition
NAME		☐ DETCIE	1	1		TO CHANGE TO WORKEN
]			6.2 NAME	1000000		
STREET ADDRESS CITY-ST-7/P			6.3 STREET			

14. Thereby certify that the information supplied with this filing 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 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 attackment of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attackment of the receiver of the chapter 607.

11-198

661-694-1673