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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000067126 (8)

TANOAK INC.

Principal Place of Business

Mailing Address

## FILED May 02 1997 8:00am Secretary of State



401 S.E. 34TH BOYNTON BE		401 S.E. 34TH AVENUE BOYNTON BEACH FL 33	435-8629					
					3. Date Incorporated or Qualified 3a. Date of La			ast Report
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address				<u> </u>	Applied For
21		26	26			65-06 90 335 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, ctc.				5. Certificate of Status Dosired See Required		
City & Stat	е	City & State			6. Election Campa Trust Fund Con	-		.00 May Be ded to Fees
Zip 24	Country         Zip         Count           25         29         30			ntry  8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes   X Yes  No				
	g. Name and Address of Curr	ent Registered Agent			10. Name and Add	ress of New Re	gistered Agent	
	TLER, RODNEY		81	Name				
401 S.E. 34TH AVENUE BOYNTON BEACH FL 33435				82 Streel Address (P.O. Box Number is Not Acceptable)				
			83					
			84	- Cit.				7:- 0-1
								Zip Code
11. Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obl	502 and 607.1508, Florida Statu ite of Florida. Such change was	iles, the above	e-named cor y the corpora	poration submits this st ation's board of director	atement for the p s. I hereby accer	urpose of changi at the appointmen	ng its registered it as registered
•	an ismaa waa, and accept the ooi	igations of, Section 607.0000, P	ionoa Statute	S.				
SIGNATURE	Signature, typed or printed name of registered	agent and title it applicable. (NO	III . Registered Ag	ent signature requ	ired when reinstating)		DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHA	NGES TO OFFIC		
TITLE		DELETE	1.1 TITLE	P	17		Cha	nge 🔲 Addition
NAME			1.2 NAME		DNEY BUTLE 01 S.E. 344h	A VE		
STREET ADDRESS				i adoress 🦋	0/ S.K. 3947	· · · · · · · · · · · · · · · · · · ·	,	
CITY-ST-ZIP		D DELETE	1.4 CITY -	ST-ZIP	OGNITON BCh.	PC. 339	( <del>)</del>	
TITLE		☐ DELETE	2.j TillE				∐ Cha	nge L Addition
NAME STREET ADORESS			2.2 NAME	LADDOCCC			•	
			1 '	T ADDRESS				
CITY-ST-ZIP TITLE		DELETE	2.4 CITY- 3.1 TITLE	S1-7IP			Cha	nge 🔲 Addition
NAME			3.2 NAME					gs [
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			3.4. CITY					
TITLE		DELETE	4.1 THILE	01 211	· · · · · · · · · · · · · · · · · · ·		☐ Cha	nge
NAME .			4.12 NAME					
STREET ADDRESS			4.\$ STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	S1 - 21P				
TITLE		☐ DELETE	5.1 TITLE				Cha	nge 🔲 Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	<del></del>	·		
TITLE		☐ DELETE	6.1 TITLE				☐ Cha	nge 🔲 Addition
NAME			6.2 NAME				i	
STREET ADDRESS	• • • •		6.\$ STREE	i address			i	
CITY-ST-ZIP	l		6.≰ C/TY-	S1 · ZIP				

14. I do hereby 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 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.