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 #

P97000015218 (5)

FILED Apr 13 1998 8:00am Secretary of State

	THCOM, INC.	00010210 (0)		,	
Principal F	Place of Business	Mailing Address			, somether the serit beat metrical abilit abilit abilit singly all the singly trade (self)
767 VILLA PORTOFINO CIRCLE DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified
					02/17/1997
2. Princip	al Place of Business	2a. Mailing Address			4, FEI Number Applied For
21		26			65-0737747 Not Applicat
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired See Required
City &	State	City & State			······································
		28	on, o oldio		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		
24	26	- ·	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
-71	g, Name and Address of Cur				10. Name and Address of New Registered Agent
	SANTUCCI, ARTHUR A		81	Name	
767 VILLA PORTOFINO CIRCLE DEERFIELD BEACH FL 33442			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
			84	City	85 Zip Code
				City	FL 85 Zip Code
11. Pursu office agent SIGNATUI	RE				corporation submits this statement for the purpose of changing its registere oration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered			nt signature rec	equired when reinstating) DATE
12.	OFFICERS	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		□ beccie	1.1 TITLE		
NAME			1.2 NAME		ARTHUR A. SANTUCCÍ 167 VIII A PORTO FINO CIRCIE
STREET ADDRE	385		1.3 STREET	ADDRESS 17	107 41117 FORIOTINO CITAL 22/1/12
CITY-ST-ZIP		DELETE	1.4 CITY-ST	-ZIP D	DEERFIELD BEACH FL 33442
TITLE		DECEIE	2.1 TITLE	ŀ	Classife Classife
NAME			2.2 NAME		
STREET ADORE	SS		2.3 STREET	1	
CITY-ST-ZIP		DELETE	2. 4 CITY-S	T-ZIP	Change Addition
TITLE		Detere	3.1 TITLE		Change Additi
NAME			3.2 NAME		
STREET ADDRE	SS		3.3 STREET	1	
CITY-ST-ZIP		DELETE	3.4. CITY-S	T- ZIP	There I Adam
TITLE		□ DELCTE	4.1 TITLE		[_] Change
NAME			4. 2 NAME		
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CITY-ST-ZIP		- Delete	4.4 CITY-ST	T-21P	
TITLE	İ	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRE	iss (53 STREET	1	
CITY-ST-ZIP			5.4 CITY-ST	- ZIP	
TITLE	İ	DELETE	6.1 TITLE		Change Additi
NAME			6.2 NAME		
STREET ADDRE	ss		6.3 STREET	ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST		
44 I here	by certify that the information supplied	d with this filing does not qualify for	or the exempt	betate noi	in Section 119.07(3)(i). Florida Statutes, I further certify that the information

14. I 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 suppliemental 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

SIGNATURE / Softer & Souther Arthur A. Son Mcc; 4/6/98 954-57082