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

PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1**9**98 DIVISION OF CORPORATIONS

FILED May 28 1998 8:00am Secretary of State

	MENT # P9700(TIC RESOURCES, INC.	0045955 (6)			
Principal Place of Business Mailing Address 10822 DENVER DRIVE COOPER ON PL 33026 COOPER ON PL 33026					
\$400 #201	& Childersity D	SAMES AS		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
DAY	ie. FL 33322			05/22/1997	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0756300	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			75 Additional ee Required
City & State		City & State			.00 May Be Ided to Fees
Zip	Country 25	Zip 3	Country 30	8. This corporation owes or has paid the current ye Personal Property Tax due June 30.	ar Intangible
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
EISNER, JAYSON 10022 DENVER DRIVE 5400 5. Objects ty Dr. 82 Street Add				Address (P.O. Box Number is Not Acceptable)	
66	OPER CITY FL 33026 She DAVE	201 6, 7L 33328	83		
			84 City	FL 85	Zip Code
11. Pursuant t	to the provisions of Sections 607.0502 ogistered agent, or both in the State of familiar with, and accord the obligations.	and 607.1508, Florida Statutes of Florida Such change was autiens of Section 607.0505 Flori	thorized by the corp	corporation submits this statement for the purpose of chang oration's board of directors. I hereby accept the appointment	ing its registered nt as registered
SIGNATURE	Signature, typed or printed harne of registered agen		Hogistered Agent signature		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTORS IN 12
TITLE	PSD	DELFTE	1.1 TITLE	☐ Cha	ange 🔲 Addition
NAME	EISNER, JAYSON		1.2 NAME		(;
STREET ADDRESS	10822 DENVER DRIVE		1.3 STREET ADDRESS		/ i
CITY-ST-ZIP	COOPER CITY FL 33026		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TiTLE	V. P Cha	ange LET Addition
NAME			2.2 NAME	HILDA MENDEZ 1280 SW 101 FERR #307 PEMBROKE PINES PL 330XS	
STREET ADDRESS			2.3 STREET ADDRESS	1280 500 /01 /8144 #00/	
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Panproke PINES IC 30013	ange Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CiTY-ST-ZIP			3.4. CITY-ST-7IP		
TITLE		☐ DELETE	4 1 TITLE	☐ Cha	ange Addition
NAME			4, 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		·	4.4 CITY - \$1 - ZIP		
TITLE		☐ DELETE	5.1 FITLE	Cha	ange 🔲 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Drietr	54 CHY-ST-ZIP	T A.	44494
TITLE		☐ DELETE	6.1 TITLE] Cha	ange L. Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

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 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 composition or the resolver or trustee empowered to execute this report as required by Chapter 607, Florida Statutey, and that my name appears in