## 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 # \$29244** 

(8)

Principal Place of Business	Mailing Address	
6446 PINEHURST CR TAMARAC FL 33321	6446 PINEHURST CR TAMARAC FL 33321-3539	

## **FILED** Jan 23 1997 8:00am Secretary of State

TOKAR & COMPANY INC.  Principal Place of Business Mailing Address  8446 PINEHURST CR TAMARAC FL 33321 FLAMARAC FL 33321-3539										
						3. Date Incorporated 02/04/1991	or Qualified		te of Last F <b>06/1996</b>	Report
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		] 00/		pplied For
21	Today of predators	26				65-0256793				ot Applicable
Suite, Apt	#, etc.	Suite, Apt #, etc				5. Certificate of Status	Desired			Additional
22		27							Fee R	equired
City & Stat	te	City & State				6. Election Campaign Trust Fund Contribu	-	П		May Be
Zip	Country	<b>28</b>	Cour	ntrv		B. This corporation ha		intonoible		to Fees
24	25	29	30	,		Florida Statutes		Yes 6		5. 199.032,
···	9. Name and Address of Curre					10. Name and Address				
TO	KAR, ROSE			B1 Na	ame					
644	16 PINEHURST CR			<b>82</b> St	reet Addre	iss (P.O. Box Number is	Not Acceptat	ole)		
TAI	MARAC FL 33321		ļ	83						<del>.</del>
				03						
			[	84 C	ty			FL	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	02 and 607.1508, Florida Stat	utes, the ab	ove-na	med corpo	oration submits this state	ment for the i		changing i	ts registered
agent re		Udilons of Section 607,6505, I	Florida Stati	utes.	Oorpordus		<b>-</b>			
SIGNATURE	Sky arch. Hybrid or proced name of registered ag	gent and title 1 applicable (N	OTE: Registered			d when reinstating)		DATE		
SIGNATURE	Sky arch. Hybrid or proced name of registered ag	gent and title 4 applicable (NI ND DIRECTORS	OTE: Registered	l Agent sig				DATE	DIRECTO	RS IN 12
SIGNATURE 12.	Signature Appeal or present near the Propositional and OFFICE RS AN	gent and title 1 applicable (N	13.	l Agent sig LE		d when reinstating)		DATE		
SIGNATURE	Sky arch. Hybrid or proced name of registered ag	gent and title 4 applicable (NI ND DIRECTORS	13. 1.1 ) II	l Agent sig LE	nature require	d when reinstating)		DATE	DIRECTO	RS IN 12
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empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

**SIGNATURE:**