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FILED

Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S32701

(2)

1. Corporation Name
TCI HOLDINGS, INC.

Principal Place of Business

600 BRICKELL AV
SUITE 600
MIAMI FL 33131
US

Mailing Address

1101 BRICKELL AVE
SUITE 703
MIAMI FL 33131-3149
US

2. Principal Place of Business

21 600 Brickell Avenue

Suite, Apt. #, etc.

22 Suite 800

City & State

23 Miami, FL

Zip

24 33131

Country

25 USA

2a. Mailing Address

26 1390 Brickell Avenue

Suite, Apt. #, etc.

27 Suite 280

City & State

28 Miami, FL

Zip

29 33131

Country

30 USA

9. Name and Address of Current Registered Agent

LYNN B. LEWIS, P.A.
1101 BRICKELL AVENUE, SUITE 703
1600 MIAMI CENTER
MIAMI FL 33131

3. Date Incorporated or Qualified

02/19/1991

3a. Date of Last Report

03/28/1996

4. FEI Number

65-0321393

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional

Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1390 Brickell Avenue, Suite 280

83

84 City

Miami

FL

85

Zip Code

33131

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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

DP

NAME

KISHU, TAN SRI T

STREET ADDRESS

600 BRICKELL AVE, SUITE 600

CITY- ST- ZIP

MIAMI FL

TITLE

DV

NAME

MONA, PUAN S

STREET ADDRESS

600 BRICKELL AVE SUITE 600

CITY- ST- ZIP

MIAMI FL

TITLE

DT

NAME

KISHENCHAND, VIJAY

STREET ADDRESS

600 BRICKELL AVE, SUITE 600

CITY- ST- ZIP

MIAMI FL

TITLE

DS

NAME

KISHENCHAND, VINOD

STREET ADDRESS

600 BRICKELL AVE SUITE 600

CITY- ST- ZIP

MIAMI FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

DP

Tan Sri Kishu Tirathrai

600 Brickell Ave., Suite 800

Miami, FL 33131

DV

Puan Sri Mona Kishu Tirathrai

600 Brickell Ave, Suite 800

Miami, FL 33131

DT

Vijay Kishu Tirathrai

600 Brickell Ave, Suite 800

Miami, FL 33131

DS

Vinod Kishu Tirathrai

600 Brickell Avenue, Suite 800

Miami, FL 33131

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.

SIGNATURE

Tan Sri Kishu Tirathrai

4/27/97

CR2E034 (9/96)