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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # \$48509

1. Corporation Name

(1)

TATA ENTERPRISES, INC.

(1

FILED

May 13 1997 8:00am

Secretary of State

	ce of Business IST. #5	579	ailing Address 0 RODMAN ST. #5							
HOLLYWOOD (FL 3302 3	HOL	LLYWOOD FL 33023-11	961						
			*:				3. Date incorporated or Qualified 04/29/1991		e of Last f 1/1996	Report
2. Principal F	Place of Business	28.	Mailing Address				4. FEI Number		A	pplied For
21		26					65-0329340			lot Applicable
Suite Apt	#, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Regulred
City & Sta	de		City & State				6. Election Campaign Financing) May Be
23		28	•				Trust Fund Contribution			to Fees
Zip	Country		Zip	Coun	try		8. This corporation has liability for in	ntangible	tax under s	s. 199.032.
24	25	29		30			Florida Statutes	Yes [] No	•
4 4 4	g, Name and Address of Cui	rrent Regist	tered Agent				10. Name and Address of New Rec	istered A	gent	
SAN	MUELS, MARCIA B			1	B1 [Name				
204	43 NW 28TH CT			-	B2	Street Addr	ess (P.O. Box Number is Not Acceptable	ia\		
MIA	MI FL 33056			[]	-	Oli bot Addit	ess (1.0. box Nomber is Not Acceptable	.0)		
				[4	83					
•					84	City		FL	85 Zip	Code
11 Pure con	Lto the provisions of Sections 607	0502 and 60	37 1508 Florida State	the abo	L	named corn	oration submits this statement for the prior's board of directors. I hereby accep		changing	ite registerer
SIGNATURE 12.	Signal are typed or printed name of registered	d agent and title	***************************************	OTE: Registered.	Ager	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIRECTO	RS IN 12
TIELE	DP	HILD DITLE	DELETE	1.1 TITL	F		ADDITIONO/OF IANGED TO OF THE		Change	
NAME	SAMUELS, GENE A		Cal Section	1.2 NAN		1			4.411.90	tadillo
Market					PIL.					
CIGALLY ATMOSESS.	│ 20443 NW 28TH UT.			13518	EET.	ADDRESS				
STREET ADORESS						ADDRESS				
CHTY-ST-ZIF	MIAMI FL 33056		DELETE	1.4 CIT	Y - \$1				Change	Addition
CHY-ST-ZIF THLE	MIAMI FL 33056 SD		☐ DELETE	1.4 CITY 2.1 TITE	Y • \$1 .E			······································	Change	Additio
City-St-Zif Title Name	MIAMI FL 33056 SD SAMUELS, MARCIA B		☐ DELETE	1.4 CITY 2.1 TITE 2.2 NAM	Y - \$1 .e Me	T-ZIP		······································	Change	Addition
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If 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 officer or director of the corporation or the receive 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 in changed, or on an attychment with an address.)

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97 Date

954.987-0080

CHANCE