

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

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Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S55407 (8)

1. Corporation Name

TANK-NICIANS OF STUART, INC.



Principal Place of Business 3982 SE COQUINA DR STUART FL 34997	Mailing Address 3982 SE COQUINA DR STUART FL 34997-6852
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/28/1991	3a. Date of Last Report 05/21/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0262797		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FONTANA, JOSEPH A. 3982 SE COQUINA DR STUART FL 34997		10. Name and Address of New Registered Agent	
		81 Name DENNY ALLEN	
		82 Street Address (P.O. Box Number is Not Acceptable) 4453 SE COQUINA DR.	
		83	
		84 City STUART	85 Zip Code FL 34997

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

PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

4/1/97

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	PRESIDENT
NAME	FONTANA, JOSEPH A.	1.2 NAME	DENNY ALLEN
STREET ADDRESS	3982 SE COQUINA DR	1.3 STREET ADDRESS	4453 SE COQUINA DR.
CITY-ST-ZIP	STUART FL	1.4 CITY-ST-ZIP	STUART, FL 34997
TITLE		2.1 TITLE	SECRETARY/TREASURER
NAME		2.2 NAME	MARYLINDA T. ALLEN
STREET ADDRESS		2.3 STREET ADDRESS	4453 SE COQUINA DR.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	STUART, FL 34997
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DENNY ALLEN - PRES

4/1/97

Date

561-220-2139

Daytime Phone #

0472724

CR2E034 (9/96)