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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S64452

(3)

T.J.W. PROPERTIES, INC.

FILED
Apr 25 1997 8:00am
Secretary of State

Principal Plac	ce of Business	Mailing Address			1 100/(0)10 (100 0/11)	it billit Atliki astin iiki	midit bidit fileri arbii	41011 414 11 1441
200 S.E. 6TH ST. 100 A FT. LAUDERDALE FL 33301			200 S.E. 6TH ST. 100A					
	ALE FL 33301	FT. LAUDERDALE FL 33	K3U1-3426		6 Data Income	and an Outstand		at Danasi
US		US	US			3. Date incorporated or Qualified		
2. Principal P	Place of Business	2a. Mailing Address	, ,,,,,		4. FEI Number			Applied For
21		26			65-029210)8		Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5 O-4/1-44-44 O	4-4 D	\$8.	75 Additional
22		27			5. Certificate of S	tatus Desired	□ Fe	e Required
City & Stat	le	City & State			6. Election Campa	aign Financing	\$5	.00 May Be
23		28			Trust Fund Cor	-		ded to Fees
Zip	Country	Zıp	Country	у	8. This corporation	n has liability for i	ntanoible tax uno	ier s. 199.032.
24	25	29	30		Florida Statutes	·	Yes No	,
1		Current Registered Agent			10. Name and Ad	dress of New Re	glatered Agent	
WR	IGHT, THERESA L.		81	Name	101011-	-1100	orn 1	
) S.E. 6TH ST.			·	URIGHT	THERE		
	TE 100-E		82	Street Add	ress (P.O. Box Numbe	r is Not Acceptab		
	LAUDERDALE FL 33301		63	10			<u> </u>	
FI.	DAUDENDALE LT 32301		ا	1 F4	- LAUA.	FLA		
			84	City			E 85	Zip_Code,
				<u> </u>			FL 3	10010
11. Pursuant	to the provisions of Sections (607.0502 and 607.1508, Florida Stal	tutes, the abov	e-named cor	rporation submits this s	tatement for the p	urpose of chang	ing its registered
	registered agent, or both, in in	ne State of Florida. Such change wane obligations of Section 607.0505.	is authorized b	is rue corbora	ation's board of director	rs. I nereby accep	or the appointmen	it as registered
anent La			Florida Statute					
•	an rammar with, and accept th	te abligations of section of feeds,	Florida Statute	, . ,				
agent. La		·					DATE	
SIGNATURE	Signature, typed or printed name of region	stered agent and title if applicable (N	IOTE: Registered Ap		ulred when reinstating)	ANGES TO OFFIC		TORS IN 12
SIGNATURE	Signature, typod or pented name of region OFFICE	istered agent and title if applicable (N ERS AND DIRECTORS	IOTE: Registered Ag		ulred when reinstating)	ANGES TO OFFIC	ERS AND DIREC	*****
SIGNATURE 12. TITLE	Signature, typed or pented name of region OFFICE	stered agent and title if applicable (N	IOTE: Registered Ag. 13.	peni signatura requ	ulred when reinstating)	ANGES TO OFFIC		*****
SIGNATURE 12. TITLE NAME	Signature, typed or pented name of region OFFICE DP WRIGHT, JAMES N., II	istered agent and title if applicable (N ERS AND DIRECTORS	IOTE: Registered Ag 13. 1.1 TITLE 1.2 NAME	eni signature requ	ulred when reinstating)	ANGES TO OFFIC	ERS AND DIREC	*****
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4. 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 eath; 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

AMES A WAYNT SAMES A

118/97 954-524-060