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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$86230

T.C.A. INVESTMENTS, INC.

FILED
Apr 10 1997 8:00an
Secretary of State

10/10/1991 04/05/1998 24 25 25 25 25 25 25 25	Principal Place of Business Mailing Address 801 BRICKELL KEY DR. 801 BRICKELL KEY DR SUITE 805 SUITE 805 MIAMI FL 33131 100 110 110 110 110 110 110 110 1									
2. Manifer	US US					3. Date Incorporated or Qualified 10/10/1991	3a. Date of Last Report 04/05/1996			
Select Apple and Select Apple and Select Apple and Select Apple and Select Additional Selection Campaign Financing Selection Fees Se	deriver the second seco					4. FEI Number	4. FEI Number Applied Fo			
Coly & Stote Coly & Stote Coly & State Coly & State	hands a comment and the comment of t									
Section Company Financing Section Care Sectio	hamilian ham					I & Certificate of Status Desired				
Zep	City & State City & State									
RUWTICH, LEE PO STRICKELL KEY OR, STE 605 MIAMI FL 11. Fursional to the production of the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent of bring or registered agent of bring to corporation submits this statement for the purpose of changing its registered of purpose and corporation submits this statement for the purpose of changing its registered of purpose and corporation submits this statement for the purpose of changing its registered of purpose and corporation submits this statement for the purpose of changing its registered of purpose and corporation submits this statement for the purpose of changing its registered of purpose and corporations board of directors. I hereby accept the depointment as registered only in a furnishment and corporation submits this statement for the purpose of changing its registered of purpose and corporations board of directors. I hereby accept the depointment as registered of purpose and corporations board of directors. I hereby accept the depointment as registered of purpose and corporations board of directors. I hereby accept the depointment as registered of the corporation and purpose and corporations board of directors. I hereby accept the depointment as registered of purpose and corporation as the corporation as the corporation of directors. I hereby accept the depointment as registered of the corporation and purpose and corporation as the corporation of directors. I hereby accept the approximation as registered of directors. I hereby accept the depointment as registered of directors. I hereby accept the approximation as registered purposes. SIGNATIBLE PO	Zip Country		F	F						
RUWITCH, ROBERT SOT BRICKELL KEY DR SUITE 605 MIAMI FL 33131 80 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code	24			30						
BOTH RICKELL KEY DR SUTTE 605 MAMI FL 33131 B8 City FL B5 City F	DI #4		un usdigrenso Wästit	8	1 Name	In Lights and Wooless of Mem Me	hereien võ	viii		
SUITE 605 MAMI FL 33131 83 64 City FL 65 Zip Codo 11. Furnament for the provisions of Sections COT RCO2 and EOT 1500s. Elected Statutes, the above-named corporations submits this statement for the purpose of changing the registered agreed of the relative view, and accept the origination of Section EOT 605. Florida. Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agreed above registered registered agreed above registered agreed										
11. Trustanet to less provincers of Sections CO7 05.02 and GO7 1508, Florida Statutes, the extoner named corporation submits this statement for the purpose of changing list registered agreed on both, in the State of Kindida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agreed to high in the State of Kindida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agreed to high in the State of Kindida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agreed to high corporation's board of directors. I hereby accept the appointment as registered agreed. 12. OFFICE RIS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RIS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. NAME SIBILITATION TO BE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. NAME 901 BRICKELL KEY DR, STE 605 13. STREET ADDRESS MIAMI FL						oress (P.O. Box Number is Not Acceptab	ie)			
The Proposition of Sections Cd7 OCO2 and G07.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its 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 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 or both, in the State of Florida Statutes. SIGNATURE 12. OFFICHS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICHS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TO O	MIA	VII FL 33131		8	3					
11.				8	4 City		E.	85 Zip (Code	
of the or registered agent or hoth, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent directors. I hereby accept the appointment as registered agent displaced and cover the obligations of Section 607:060s, Florida Statutes. SIGNATURE	44 10	to the average over at Court one COZ OF	02 and 607 1509 Florida Status	ton the she		recording submits this statement for the s		Onging it	o rooistored	
RAWE STRUCKELL KEY DR, STE 605 13 STREEF ADDRESS 14 CTITY ST-ZP		OFFICERS AN	ND DIRECTORS		gent signature requ			IRECTOR		
SHELL ALIGNETS SOI BRICKELL KEY DR, STE 605 1.3 STREEL ADDRESS 1.4 CITY - ST - ZIP	[and [☐ DELETE	1.1 TITLE			L.	Change	Addition	
MAMI FL	1		442		1					
VPS	l .		605							
NAME RUWTCH, ROBERT 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP			T DELETF					Change	Addition	
STREET ADDRESS C. Try Sty 70P MAMN FL	1	· - 					_			
Change	1 1				1	•			i	
NAME	C-17:51-70P	MIAMI FL		2. 4 CiTy	- \$T - <i>I</i> IP	·			····	
SHEET ADDRESS STREET ADDRESS STREE			☐ DELETE	1] Change	Addition	
CHY-SI-7P 34. CHY-SI-7P 34. CHY-SI-7P Change Addition	i l				1	1				
DELETE					.					
A 2 NAME			DELETE					Change	Addition	
LTY ST 7PF	1 1						_			
THE	STREET ADDRESS			4.3 STRE	ET ADDRESS					
SPECIAL ADDRESS	t (Y S) 79			4.4 CITY	-ST-ZIP				···	
SPECITATIONESS	1		☐ DETELE		i		L	J Change	L Addition	
SACITY-ST-ZIP	1								•	
DELETE	1				l l					
NEW 6.2 NAME STREET ADDRESS 5.3 STREET ADDRESS COT: 5: 7.8 6.4 CITY-ST-ZIP	F		☐ DELETE					Change	Addition	
CON S 7/P 64 CITY-ST-ZIP	1				1		_	·	= .	
	1			1		•				
44 Light forces a wide that the information quantized with this fillion door not qualify for the expression stated in Continue 110 07/20/0. Elected State for Liveling continue that the	1			6.4 CITY	ST - ZIP					

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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-577-3702