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Mar 04 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 # **S97810** (3)

1. Corporation Name
TFPS, INC.

Principal Place of Business
**550 NW LEJEUNE RD
MIAMI FL 33135**

Mailing Address
**550 NW LEJEUNE RD
MIAMI FL 33126-5671**

3. Date Incorporated or Qualified 12/02/1991	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0328495	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	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent DELAURIER, FRANK G. 550 NW LEJEUNE RD MIAMI FL 33135	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KEY, JAMES F 235 N BOULEVARD IDAHO FALL ID ☐ DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	CHAIR KEY, James F. Lockheed Martin Idaho Tech Idaho Falls, ID ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOHNART, EDWARD . R 1635 W. SPENCER APPLETON WI ☒ DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	VCH PIERCE, Ron C. 940 N. Martin Luther King Dr Prichard, AL ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS MCLAUGHLIN, JOHN J. 550 NW LEJEUNE RD. MIAMI FL ☐ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	SEC DELAURIER, Frank G. (Same address as before) ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DELAURIER, FRANK G. 550 NW LEJEUNE RD. MIAMI FL ☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	DAL CAPRAROLA Jr., J. 1465 Abbottstown Pike Hanover, PA ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	AS MCLAUGHLIN, John J. (same address as before) ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	TREAS. WINSAND, Amos O. 909 Tottenham Birmingham, MI ☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: **Frank G. DeLaurier, 3/2/97** (305) 443-9353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)