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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



H ORIDA DEPARTMENT OF STATE

Sandra B. alortham

Secretery of State DIVISION OF CORPORATIONS

DOCUMENT # V12835

1. Corporation Name
TECHNICAL DESIGN ASSOCIATES INC.

(7)

## **FILED** Sep 03 1997 8:00am Secretary of State

Principal Place of Busine 9715 W BROWARD BLVI 236 PLANTATION FL 33324 US	D	Mailing Address 9715 W. BROWAR 236 PLANTATION FL 3 US	Mailing Address 9715 W. BROWARD BLVD. 236 PLANTATION FL 33324-2351			3. Date Incorporated or Qualified 02/10/1992 05/01/1996  4. FEI Number Applied For		
21		26]	26			OF 0040007	65-0313687 Not Applicable	
Sulte, Apt #, etc.		Suite, Apt. #, (	Suite, Apt. #, etc.			L. b. Certificate of Status Desired L. I. T.	ite of Status Desired	
City & State		City & State					00 May Be	
Zip Country		7ip	Zip Country			Trust Fund Contribution		
24 25		29	30			Florida Statutes Yes No		
	me and Address of Cur	rrent Registered Agent				10. Name and Address of New Registered Agent		
DIECKMANN				81	Name	>		
	TERR., #2118			82	Street A	address (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·	
PLANTATION	N FL 33324			83		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
				03				
				84	City	FL B5 Z	ip Code	
12. TITLE DIECK	oped or printed have of try states OFFICERS MANN, JOHN G. 53RD CT NO	agent and trie if applicable AND DIRECTORS DEL	13. ETE 1.1 III 1.2 NA	LE ME	I signature r	oquired witen reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTO  Chang		
CITY-ST-ZIP JUPITE			1.3 SI 1.4 Cil					
TITLE VD	<b></b>	DEL				President Schang	e Addition	
	MANN, JAMES		2 2 NA	ME		FRESIDENT Schange  JAMES DIFCKMAN  15549 MINTI LEWRY DE N 208		
OI ANIT	W 85 TERR., #2118 ATION FL		2.3 S1	REET A	DDRESS			
TITLE	AHOR FL	DEL)	2. 4 Cl		- ZIP	Higlesh FI 33014	· ·	
NAME		DEC	ETE 3.1 Ti)			Chang	e L Addition	
STREET ADDRESS			1		DDRESS			
CITY-ST-ZIP			3.4. CI		- 1			
TITLE		DEL!				☐ Chang	e 🔲 Addition	
NAME .			4. 2 N/	ME				
STREET ADDRESS			4.3 ST	REFT A	DDRESS			
CITY-ST-ZIP	<del></del>		4.4 CH		ZIP		[=12. ·····	
TITLE NAME		☐ DĒLI				Chang	e LYAddition	
STREET ADDRESS			5.2 NA		DDRESS	k	-M 25	
CITY-ST-ZIP			5.3 STI		1	•	Q/D	
TITLE		DE) I			111	Chang	e Addition	
NAME		<del>-</del>	62 NA			000002284326°°° -09/04/9701004009		
STREET ADDRESS					DDRESS	-U9/U4/9701004009		
CITY-ST-ZIP			64 CiT			***550.00		
intormation indicate I am an officer or d	ed on this annual report of irector of the corporation	or supplemental annual rer	ort is true and a cripowered to e	coura	ate and 1	ated in Section 119.07(3)(i), Florida Statutes. I further certify the lhat my signature shall have the same legal effect as if made a port as required by Chapter 607, Florida Statutes; and that my	under oath: tha	