

FILED



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

Apr 28 1997 8:00am
Secretary of State

1. Corporation Name
TPF "50/50", INC.

Principal Place of Business
250 174TH STREET
#301
NORTH MIAMI BEACH FL 33160

Mailing Address
C/O FREDERICK B. GOMER & ASSOC
PO BOX 450549
SUNRISE FL 33345-0549
US

3. Date Incorporated or Qualified 06/04/1992	3a. Date of Last Report 06/07/1996
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2. Principal Place of Business
21 504 N. PARKWAY

2a. Mailing Address
26 304 N. PARKWAY

4. FEI Number	Applied For
65-0354003	Not Applicable

22 Suite, Apt. #, etc. Golden Beach, FL

Suite, Apt. #, etc.
27 Golden Beach, FL

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees

City & State

City & State _____

24	Zip 33160	25	Country Dade
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Zip	Country
33160	Dade

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARAK, ALEX T.
633 N.E. 167TH STREET
SUITE 517
NORTH MIAMI BEACH FL 33162

Mark Katsman, Esq.
Roth & Milne
9350 S. Dixie Highway, Ph 2
Miami, Florida 33156

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 Mark Ketsman
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-installing)

DA

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ARTSIBACHEV, VLADIMIR	
STREET ADDRESS	250 174TH ST., #301	
CITY - ST - ZIP	MIAMI FL	

1.3 TITLE	Change	Addition
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TITLE	VST	<input type="checkbox"/> DELETE
NAME	ARTSIBACHEV, VLADIMIR	
STREET ADDRESS	250 174TH ST., #301	
CITY-ST-ZIP	MIAMI FL	

2.1 TITLE	Chance	Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

3.1 TITLE	Channel	Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

4.1 TITLE	Change	Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

5.1 TITLE		Change	Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

6.1 TITLE	Change	Addition
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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

4/12/65

205-190-00 12

CR2E034 (9/96)