

# FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **V44772** (4)

1. Corporation Name

**TEMPXEC USA, INC.**



Principal Place of Business

**1701 WEST HILLSBORO BLVD.  
SUITE 102  
DEERFIELD BEACH FL 33442  
US**

Mailing Address

**1701 WEST HILLSBORO BLVD.  
SUITE 102  
DEERFIELD BEACH FL 33442  
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

9. Name and Address of Current Registered Agent

**MYERS, RICHARD L.  
1701 W. HILLSBORO BLVD. #204  
DEERFIELD BEACH FL 33442**

3. Date Incorporated or Qualified

**06/16/1992**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**65-0364887**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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 agent 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME  
**P TD  
MYERS, RICHARD L.  
137 LUCINA DRIVE  
HYPOLEXO FL**

1.2 TITLE ☐ DELETE

NAME  
**V SD  
MYERS, MARGARET A.  
137 LUCINA DRIVE,  
HYPOLEXO FL**

1.3 TITLE ☐ DELETE

NAME  
**D  
MYERS, RICHARD L II  
137 LUCINA DR  
HYPOLEXO FL**

1.4 TITLE ☒ DELETE

NAME  
**VPAS  
RUSSO, DONNA M  
1060 NW 75TH AVE  
PLANTATION FL**

1.5 TITLE ☐ DELETE

NAME  
**VP  
LIHAN, DANA  
5130 NE 17TH AVE  
FT LAUDERDALE FL**

1.6 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME  
**Gregg Exec. Vice Pres.  
Gregory L. Greenlund  
3220 NW 107 Ave  
Coral Springs, FL. 33065**

1.2 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.3 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.4 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.5 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.6 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE: **Richard L. Myers Pres 2-2-96 954-360-9980**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)