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 # **V73173** **(9)**

1. Corporation Name

TOR-CAN CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
6272 S. DIXIE HIGHWAY **MIAMI FL 33143**	**6272 S. DIXIE HIGHWAY** **MIAMI FL 33143**

3. Date Incorporated or Qualified: **10/19/1992**

3a. Date of Last Report: **09/29/1995**

2. Principal Place of Business
21:

Suite, Apt. #, etc.
22:

City & State
23:

Zip 24: Country 25:

2a. Mailing Address
26: 417 E. SHERIDAN ST

Suite, Apt. #, etc.
27: 111

City & State
28: DANIA FLORIDA

Zip 29: 33004 Country 30:

4. FEI Number: **65-0383229** ☐ 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

9. Name and Address of Current Registered Agent

KABATZNIK, CLIVE
10241 S.W. 136 ST.
MIAMI FL 33176

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, this 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when changing registered agent.

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	P.D	☒ Change ☐ Addition
NAME	ZEN, LUCIANO		1.2 NAME	ZEN, LUCIANO	
STREET ADDRESS	6272 S. DIXIE HIGHWAY		1.3 STREET ADDRESS	417 E. SHERIDAN ST. STE 111	
CITY-ST-ZIP	MIAMI FL 33143		1.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
TITLE	VD	☐ DELETE	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	ZEN, ROBERTO		2.2 NAME	ZEN, ROBERTO	
STREET ADDRESS	6272 S. DIXIE HIGHWAY		2.3 STREET ADDRESS	417 E. SHERIDAN ST. STE 111	
CITY-ST-ZIP	MIAMI FL 33143		2.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	KABATZNIK, CLIVE		3.2 NAME		
STREET ADDRESS	6272 S. DIXIE HIGHWAY		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33143		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 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)(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: _____ MAY 21/96 954-927-9888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)