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Daytime Phone #

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.								
1	RPORATION STATEMENT	Secretar	TMENT OF STATE y of State orporations		ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا	The last		
DOCUMENT # 712887					06 OCT 23 AM 9: 56			
1. Corporation Name TARA WEST ASSOCIATION, IN			on, Inc.	SECRETARI OF STATE TALLAHASSEE, FLORIDA				
I TINTI VVL DI TIL DOCTI IN TOTAL								
					2010	01-1951.2		
2. Principal Office Address 2109 N.E.68TH ST 2109			68TH ST	11/011	02 CR2E081 (12/05)	003.122.8		
Suite, Apt. #, etc. Suite, Apt. #, 6			<u> </u>	4. Date Incom	porated or Qualified	103.100		
City & State City & State)-A:- CI		liness in Florida	Applied For		
FT LAUDERDALE FL. FT LAL			DALE FL Country	.59-	1227839	Applied For Not Applicable		
333	308	33308		CERTIFICATE		Additional Fee required ra Certificate of Status		
7. Name and Address of Current Registered Agent								
	Street Address (P.O. Box Number is No	LHNO				2000		
	Street Address (P.O. Box Number is Not Acceptable) 2109 N.E. 687H STREET Sulto And # 550							
	Sulte, Apt. #, Etc. # 104				State Zip Code			
	FT LAUDER	DALE		·	FL 33308			
8. I, being Signature of	appointed the registered agent of the about	l au	familiar with and accept the	obligations of secti	ion 607.0505 or 617.0503, F.S. Date October 16	£ 200/		
Registered Agent REGISTERED AGENT MUST SIGN					Date U(0007 1	0,000		
9. Names	and Street Addresses of Each Officer and	/or Director (Florida nonpr	· · · · · · · · · · · · · · · · · · ·					
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip			
Р	BEVERLY MCRITC	HIE 2109	NE 68TH ST	#101	FTLANDERDALE	FL. 33308		
<u> </u>	DOROTHY SOLINS	KY 2109	NE 68 TH ST	#201	FT LANDERDALE 1	FL 33308		
S	VICKI LARUE	2109	NE 68TH ST	#206	FT LAUDERDALE	FL. 33308		
T	ROSE VILLANO	2109	NEGSTA ST	#104	FT LAUDERDALE	FL. 33308		
D	GREG SCHMID	T 210°	NE 68745T	#103_	FILAUDERDALE	FL. 33308		
			·	11/09		₹¥245.00		
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under cath. SIGNATURE: **Containing** **Containin								
SIGNATURE: OF //WWW NOS VILLINO, JULIANUS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Destina Phone #								

2/2 October 18, 2006 attu Michelle Milligan Please find Corp Reinstatement application enclosed along with balance check \$ \$245.00 Os descussed, there are funds on account for this corporateon, in the amount of \$2073.75 previously sent October, november _ 2002. I would appreciate your advising me of the reinstatement as soon as it is finalized Thank you for your cooperation Kose Villano Freaurer Jara West association above sent in 2002 is enclosed