

FILE NOW: FILING FEE IS \$61.25

FILED
May 09 1997 8:00am
Secretary of State



NONPROFIT CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # 713888 (6)
1. Corporation Name
TARA ASSOCIATION, INC.



Principal Place of Business Mailing Address
2121 NORTHEAST 68 STREET FORT LAUDERDALE FL 33308
2121 NORTHEAST 68 STREET FORT LAUDERDALE FL 33308-1163

3. Date Incorporated or Qualified 12/29/1967
3a. Date of Last Report 04/15/1996

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 25 29 30

4. FEI Number 59-1237569 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
RAPOPORT, HENRY
2121 NE 68TH STREET
APT 213
FORT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent
81 Name Pamela Joyner
82 Street Address (P.O. Box Number is Not Acceptable) 2121 NE 68th St
83 Apt 101
84 City Ft. Lauderdale FL 85 Zip Code 33308

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Pamela Joyner, President *Pamela Joyner* 4-25-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	LIST, SIMONE	
STREET ADDRESS	2121 NE 68TH ST., APT. #106	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JOYNER, PAMELA	
STREET ADDRESS	2121 NE 68TH ST., APT. #101	
CITY-ST-ZIP	FT LAUDERDALE FL 33308	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GAFFORD, LUCY NELL	
STREET ADDRESS	2121 NE 68TH ST., APT. #210	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	SWOBODA, ANNE	
STREET ADDRESS	2121 NE 68TH ST., APT. #211	
CITY-ST-ZIP	FT LAUDERDALE FL 33308	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	RAPOPORT, HENRY	
STREET ADDRESS	2121 NE 68TH STREET, APT 213	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D Gustavo Saldias
6.3 STREET ADDRESS	2121 NE 68th St., Apt. #214
6.4 CITY-ST-ZIP	Ft. Lauderdale, FL

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)