

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2005 8:00 am
Secretary of State

08-01-2005 90023 008 ****61.25

DOCUMENT # 814298

1. Entity Name
TAROMINA APTS. INC.



Principal Place of Business
**1936 S OCEAN DRIVE
HALLANDALE, FL 33009**

Mailing Address
**1936 S OCEAN DRIVE
HALLANDALE, FL 33009**

30058743



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07142005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-0933047

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CALABRO, CARMELA
1936 SOUTH OCEAN DRIVE
18A
HALLANDALE BEACH, FL 33009**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T
NAME CARIDI, JOAN
STREET ADDRESS 1936 S OCEAN DR 11B
CITY-ST-ZIP HALLANDALE, FL 33009 ☒ Delete

P
NAME SIMON FARAH
STREET ADDRESS 1936 S. OCEAN DR APT 78D
CITY-ST-ZIP HALLANDALE, FL 33009 ☐ Change ☒ Addition

1V
NAME CALABRA, CARMELA MRS
STREET ADDRESS 1936 S OCEAN DR A18
CITY-ST-ZIP HALLANDALE, FL 33009 ☒ Delete

T
NAME TONI DAMIGELLA
STREET ADDRESS 1936 S. OCEAN DR APT 21A
CITY-ST-ZIP HALLANDALE, FL 33009 ☐ Change ☒ Addition

P
NAME CHIRICO, MARCO
STREET ADDRESS 1936 SO. OCEAN DRIVE
CITY-ST-ZIP HALLANDALE, FL 33009 ☒ Delete

S
NAME CARL SCALISE
STREET ADDRESS 1936 S. OCEAN DR. APT 22A
CITY-ST-ZIP HALLANDALE, FL 33009 ☐ Change ☒ Addition

S
NAME COLSON, GEORGIA
STREET ADDRESS 1936 S OCEAN DR 11C
CITY-ST-ZIP HALLANDALE, FL 33009 ☒ Delete

S
NAME MIRIAM VARELA
STREET ADDRESS 1936 S. OCEAN DR. APT 9D
CITY-ST-ZIP HALLANDALE FL 33009 ☐ Change ☐ Addition

S
NAME MAYSE, MARY JO
STREET ADDRESS 1936 S OCEAN DR 13 C
CITY-ST-ZIP HALLANDALE, FL 33009 ☐ Delete

IV
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

V
NAME VARVARO, ANTHONY
STREET ADDRESS 1936 SO OCEAN DRIVE
CITY-ST-ZIP HALLANDALE, FL 33009 ☐ Delete

☐ Change ☒ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Simon Farah
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/26/2005
Date

954 458-6621
Daytime Phone #