2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845563

Entity Name: VIRGINIA TAG, INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
5426 ROBIN NORFOLK,	N HOOD RD VA 23513	US			
Current Mailing Address:			New Mailir	New Mailing Address:	
PO BOX 12 NORFOLK,		US			
FEI Number:	21-0743293	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301 US 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.					
SIGNATUR					
		c Signature of Registered Agent		Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPS () GROSS, THOM I 816 DE LA FAYE VIRGINIA BCH, V	ETTE COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () MCLAUGHLIN, E 1712 HERFORD VIRGINIA BEACH	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () MCCONNELL, R 5426 ROBIN HO NORFOLK, VA 2	OD RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () MILLER, MELVIN 1300 FAIRWAY VIRGINIA BCH, F	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () HAHN, ROBERT 3650 SEA GULF CHESAPEAKE, I	BLUFF	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () JOHNSON, RAY 3650 SEA GULF VIRGINIA BEACK	BLUFF	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition JOHNSON, RAY N. 9478 BAY FRONT DR. NORFOLK, VA 23518	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GROSS, THOM H. VPS 01/05/2005