

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # J20945

1. Entity Name
THE TACKERIA, INC.



Principal Place of Business
**13889 WELLINGTON TRACE
 A-8-A-12
 WELLINGTON, FL 33414**

Mailing Address
**12765 FOREST HILLS BLVD
 SUITE 1302
 WELLINGTON, FL 33414 US**



02022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2695913	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DE MENDOZA, III, MARIO G P.A.
 12765 FOREST HILL BOULEVARD, SUITE 1302
 WELLINGTON, FL 33414**

**DO NOT WRITE
 IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST. COPPOLA, ANTHONY L. 11967 POLO CLUB RD WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COPPOLA, JESSICA S 12765 FOREST HILL BOULEVARD, SUITE 1302 WELLINGTON, FL 33414
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 03/04/06-80018-014 150.00

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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: **Anthony L. Coppola, Pres.** ✓ **2/10/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #