

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K17357** (0)

1. Corporation Name

TAREQ AND COMPANY, INCORPORATED



Principal Place of Business

**8460 SW 68 ST.
MIAMI FL 33143**

Mailing Address

**8460 SW 68 ST.
MIAMI FL 33143**

2. Principal Place of Business

2a. Mailing Address

21 **11296 161 ROAD**

26 **11296 161 ROAD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **Live Oak, FL**

28 **Live Oak, FL**

Zip

Country

Zip

Country

24 **32060**

25 **Swansee**

29 **32060**

30 **Swansee**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/08/1988

3a. Date of Last Report

04/26/1995

4. FEI Number

65-0039318

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

10. Name and Address of New Registered Agent

**LOW, ELAINE B
8460 SW 68 ST.
MIAMI FL 33143**

81 Name

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

11296 161 ROAD

83

84 City **LIVE OAK**

FL

85 Zip Code

32060

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE **Elaine B. Low** **ELAINE B. LOW** **SEC/TREAS, OWNER**

Signature, typed or printed name of registered agent (and if applicable, the corporation)

(NOTE: Registered Agent sign only if received without filing fee)

DATE

Jan 23 1996

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD
LOW, JAMES K.**
STREET ADDRESS **8460 SW 68TH ST**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **STD
LOW, ELAINE B.**
STREET ADDRESS **8460 SW 68TH ST**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **LOW, JAMES K.**
1.3 STREET ADDRESS **11296 161 ROAD**
1.4 CITY-ST-ZIP **LIVE OAK, FL 32060**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **LOW, ELAINE B.**
2.3 STREET ADDRESS **11296 161 ROAD**
2.4 CITY-ST-ZIP **LIVE OAK, FL 32060**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Elaine B. Low** **ELAINE B. LOW**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 23 1996

Date

904 776-2680

Telephone Number

CR2E034 (12/95)