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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # L16973

(4)

TAZRAK CORP. Principal Place of Business 307 HYDE PARK AVE TAMPA FL 33806	Mailing Address 307 HYDE PARK AVE TAMPA FL 33606			3a. Date of Last Report
			3. Date Incorporated or Qualified 09/18/1989	02/28/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1	26		59-2969833	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	27		6. Election Campaign Financing	\$5.00 May Be
3	28		Trust Fund Contribution	Added to Fees
Zip Countr	y Zip	Country	8. This corporation has lability for	1 mJ.
4 25	29	30	Florida Statutes Yes	
9. Name and Addre	ess of Current Registered Agent	81 Name	10. Name and Address of New I	Registereo Agent
OURDAIL OODDON II				
SHIRAH, GORDON H. 307 HYDE PARK AVE		82 Street Add	dress (P.O. Box Number is Not Accepta	ble)
TAMPA FL 33606		83		,
TAIN A LE GOOG		84 City		85 Zip Code
	tions 607.0502 and 607.1508, Florida Statu			FL
or regionards again, or both, in the	-A at Contine COZ OCOE Florido Statuto			
Signature: typed or printed name	tions 607,0502 and 607,1506, Florida Statute • State of Florida, Such change was authors ations of, Section 607,0505, Florida Statute • of regishited agent and title if applicable. N OFFICERS AND DIRECTORS	S. O'TE Registered Agen, signature redur	red when ministring)	DATE FICERS AND DIRECTORS IN 12
SIGNATURE Signature typed or printed rains:	n of registered agent and title it applicable. (N	OTE Registered Agen, signature recur	red when ministring)	DA ⁷ ŧ
SIGNATURE Signature spand or printed name 12. TITLE PST NAME SHIRAH, GORDON	TO regulated agent and take it applicable. (NO OFFICERS AND DIRECTORS DELETE N. H.	OTE Registered Agrin, signature reduin 13.	red when ministring)	DATE FICERS AND DIRECTORS IN 12
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I do nereby certify that the information supplied with this lining is voluntarily furnished and does not quality for the extemplorin state in factor in 1950 (2/kg). Find a statutes, 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. 8/3

SIGNATURE:

Esther Villanuera Esther Villenuere 5/20/86
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

253-3258 Dayone Prone #