## 2005 FOR PROFIT CORPORATION

## ANNUAL REPORT DOCUMENT # L61826 1. Entity Name TARQUIN ENTERPRISES LTD., INC. Principal Place of Business Mailing Address 3485 PALLADIAN CIR 3485 PALLADIAN CIR

**FILED** Jan 20, 2005 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

DEERFIELD BEACH, FL 33442 US

CR2E034 (10/03) 01162005 No Chg-P Applied For 4. FEI Number

65-0199749 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent BROWNING, BARBARA ANN 3485 PALLADIAN CIR

DEERFIELD BEACH, FL 33442 US

## DO NOT WRITE

DEERFIELD BEACH, FL 33442			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 Signature, typed or printed name of registered agent and title if applicable.  NOTE Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution,	ing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS SITY-ST-ZP	D BROWNING, BARBARA ANN 3485 PALLADIAN CIR DEERFIELD BEACH, FL				000000186971 01/21/05-80080-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U1/21/05-80080-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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 eath, that I am an officer or director of the corporation or the deever or mustee employered to arecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if					

OR DIRECTOR

SIGNATURE: