2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 31, 2007 8:00 am **Secretary of State DOCUMENT # L61826** 1. Entity Name 01-31-2007 90046 009 ***150.00 TARQUIN ENTERPRISES LTD., INC. Principal Place of Business Mailing Address 3485 PALLADIAN CIR 3485 PALLADIAN CIR 40000---DEERFIELD BEACH, FL 33442 US DEERFIELD BEACH, FL 33442 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122007 Chg-P CR2E034 (12/06) Applied For 4. FEI Number City & State City & State 65-0199749 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BROWNING, BARBARA ANN Street Address (P.O. Box Number is Not Acceptable) 3485 PALLADIAN CIR DEERFIELD BEACH, FL 33442 City Zip Code 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Change ☐ Addition ☐ Delete TITLE BROWNING, BARBARA ANN NAME 3485 PALLADIAN CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

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: BACKALA ANN BOWNING 01.22.07 954.725.0575

ATTACHMENT 40007518



Division of Corporations

Annual Report

Document Number
L61826

Business Entity Name TARQUIN ENTERPRISES LTD., INC.

FEI Number

650199749

FEI Number Status

Listed Above Applied

For Not Applicable

Certificate of Status Desired

Yes No \$8.75 each

Election Campaign Financing Trust Fund Contribution

Yes No

Principal Place of Business

Address

3485 PALLADIAN CIR

Suite, Apt. #, etc.

City, State

DEERFIELD BEACH

, FL

, FL

Zip Code & Country 33442

US

Mailing Address

Address

3485 PALLADIAN CIR

Suite, Apt. #, etc.

City, State

DEERFIELD BEACH

Zip Code & Country 33442

US

Name and Address of Registered Agent

Name (Last, First, Middle, Title)

- OR -

Business to serve as RA

BROWNING, BARBARA ANN

ATTAC: 12 ENT 40007518

Address (PO Box is not acceptable)

Suite, Apt. #, etc.

City, State

DEERFIELD BEACH . FL

Zip Code & Country

33442 US

3485 PALLADIAN CIR

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as

Officer/Director

BROWNING, BARBARA ANN

Street Address

3485 PALLADIAN CIR

City, State

DEERFIELD BEACH

, FL

Zip Code & Country

33442

D

Title

Name (Last, First, Middle, Title)

- OR -

| ATTACHMENT 4000 7518 | |
|----------------------|--|
| #L61824 | |

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address
City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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