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 # **L88827** **(5)**

1. Corporation Name

TAIT & COMPANY, P.A.

Principal Place of Business	Mailing Address
6073 NORTHWEST 167TH ST. SUITE C-19 MIAMI FL 33015	6073 NORTHWEST 167TH ST. SUITE C-19 MIAMI FL 33015

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

3. Date Incorporated or Qualified: **07/18/1990**
3a. Date of Last Report: **03/01/1995**
4. FEI Number: **65-0210954** ☐ 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 ☐ [redacted]

9. Name and Address of Current Registered Agent

JOHNSON, KARY M.
6073 NW 167TH ST.
SUITE C-19
MIAMI FL 33015

10. Name and Address of New Registered Agent

81 Name: TAIT, GREGORY R.
82 Street Address (P.O. Box Number is Not Acceptable): 6073 N.W. 167th Street
83 Suite C-19
84 City: Miami, FL **FL** 85 Zip Code: 33015

11. Pursuant to the provisions of Sections 607.0502 and 617.1508, 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: Gregory R. Tait — 2/9/96
(Signature of New Registered Agent, if changing) (Date) (Signature of Former Registered Agent, if changing)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1 TITLE	DP	☐ DELETE	1 TITLE: Treasurer	☐ Change	☒ Addition
NAME	TAIT, GREGORY R.		2 NAME		
STREET ADDRESS	6073 NW 167TH ST.		3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		4 CITY-ST-ZIP		
TITLE	DVTS	☒ DELETE	2 TITLE	☐ Change	☐ Addition
NAME	JOHNSON, KARY M.		2 NAME		
STREET ADDRESS	6073 NW 167TH ST.		2 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2 CITY-ST-ZIP		
TITLE		☐ DELETE	3 TITLE: Director, Vice-President	☐ Change	☒ Addition
NAME			3 NAME: Ronald W. Turner		
STREET ADDRESS			3 STREET ADDRESS: 6073 N.W. 167th Street		
CITY-ST-ZIP			3 CITY-ST-ZIP: Miami, FL		
TITLE		☐ DELETE	4 TITLE	☐ Change	☐ Addition
NAME			4 NAME		
STREET ADDRESS			4 STREET ADDRESS		
CITY-ST-ZIP			4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 TITLE	☐ Change	☐ Addition
NAME			5 NAME		
STREET ADDRESS			5 STREET ADDRESS		
CITY-ST-ZIP			5 CITY-ST-ZIP		
TITLE		☐ DELETE	6 TITLE	☐ Change	☐ Addition
NAME			6 NAME		
STREET ADDRESS			6 STREET ADDRESS		
CITY-ST-ZIP			6 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is true, voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 above, or on an attachment with an address.

SIGNATURE: Gregory R. Tait — 2/9/96 — 556-7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

GREGORY R. TAIT

CR2E034 (12/95)