


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # M02565		
1. Entity Name TANVERGE CORPORATION		
Principal Place of Business 14025 NW 58TH COURT MIAMI LAKES, FL 33014-3116		Mailing Address 14025 NW 58TH COURT MIAMI LAKES, FL 33014-3116
DO NOT WRITE IN THIS SPACE		
		01062005 No Chg-P CR2E034 (10/03)
		4. FEI Number 59-2431340
		Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ATRIUM REGISTERED AGENTS, INC 1500 SAN REMO AVE SUITE 125 CORAL GABLES, FL 33148		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV THORNE, VERONIKA 2625 SEA ISLAND DR FT LAUDERDALE, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP THORNE, GEORGE 2625 SEA ISLAND DR FT LAUDERDALE, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD HEDIGER, VALERIE 3021 NE 43RD ST FORT LAUDERDALE, FL 33308	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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)(f), 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 another like empowered.		
SIGNATURE: <u>Veronika Thorne</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3.10.05 305-822-3223 <small>Date Daytime Phone #</small>