## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # M77541  1. Entity Name TBG OF TAMPA, INC.		
Principal Place of Business	Mailing Address	<u></u>
6091 JOHNS RD	.6091 JOHNS RD	
SUITE 1	SUITE 1	
TAMPA, FL 33634-4412 US	TAMPA, FL 33634-4412 US	



## DO NOT WRITE IN THIS SPACE

01052005 No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2898032

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent					·	
R. JAMES ROBBINS, JR, . 101 EAST KENNEDY BOULEVARD SUITE 3700 TAMPA, FL 33602-0000			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.						
DICAMATURE						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000272345 03/21/05-80085-023 158.75	
10.	OFFICERS AND DIREC	TORS			<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SPECTOR, HERBERT 6091 JOHNS RD STE 1 TAMPA, FL 336344412				· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		par-		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), Fiorida 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 of usee and occurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if						

SIGNING OFFICER OR DIRECTOR

SIGNATURE:

HERB SPECTOR/PRES/CEO

03/18/05

(813) 881-9555

Daytime Phone #