

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000098520

Entity Name: TAP ENTITIES, INC.

FILED
Nov 02, 2005
Secretary of State

Current Principal Place of Business:

910 W. KIRBY J
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

910 W. KIRBY J
TAMPA, FL 33604

New Mailing Address:

FEI Number: 26-1889540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELAEZ, A. DENNIS ESQ.
1905 W. SLIGH AVE.
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COVP (X) Delete
Name: HEYT, GARY
Address: 4001 N. NEBRASKA AVE.
City-St-Zip: TAMPA, FL 33603

Title: S () Delete
Name: MARRERO, VICTOR
Address: 4001 N. NEBRASKA AVE.
City-St-Zip: TAMPA, FL 33603

Title: PCEO () Delete
Name: PELAEZ, TIMOTHY A
Address: 910 W. KIRBY ST.
City-St-Zip: TAMPA, FL 33604

Title: CFO () Delete
Name: PELAEZ, TIMOTHY A
Address: 910 W. KIRBY ST.
City-St-Zip: TAMPA, FL 33604

Title: COVP () Delete
Name: BENJAMIN, EARL H
Address: 4001 N. NEBRASKA AVE
City-St-Zip: TAMPA, FL 33603

Title: V () Delete
Name: VELAZQUEZ, ISRAEL H
Address: 1707 W. BAKER ST.
City-St-Zip: PLANT CITY, FL 33563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BOUTERIE, KIM M
Address: 4001 N. NEBRASKA AVE
City-St-Zip: TAMPA, FL 33603

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY A. PELAEZ

PCEO

11/02/2005

Electronic Signature of Signing Officer or Director

Date