

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90149 006 ***150.00

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1. Entity Name
TAD HOLDING CORP.



Principal Place of Business
7040 S A1A HWY
MELBOURNE BEACH, FL 32951

Mailing Address
7040 S A1A HWY
MELBOURNE BEACH, FL 32951

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4. FEI Number
01-0803860

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 0 104 7±6
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6. Name and Address of Current Registered Agent

BASH, JOSHUA D
20801 BISCAYNE BLVD, STE 304
AVENTURA, FL 33180

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 0 18 p.
8 104 4 ± 15 - -

10. OFFICERS AND DIRECTORS

TITLE P
NAME DELUCAS, DONALD
STREET ADDRESS 7040 S A1A HWY
CITY-ST-ZIP MELBOURNE BEACH, FL 32951

TITLE VST
NAME DELUCAS, CINDY
STREET ADDRESS 7040 S A1A HWY
CITY-ST-ZIP MELBOURNE BEACH, FL 32951

TITLE P
NAME DELUCAS DONALD
STREET ADDRESS 2299 SARNO RD. STE A
CITY-ST-ZIP MELBOURNE, FL 32935

TITLE VST
NAME DELUCAS CINDY
STREET ADDRESS 2299 SARNO RD. STE A
CITY-ST-ZIP MELBOURNE, FL 32935

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/20/05 (321) 223-5046