

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000090280

Entity Name: TARA INVESTMENTS, INC.

FILED  
Apr 12, 2005  
Secretary of State

## Current Principal Place of Business:

PO BOX 246445  
PEMBROKE PINES, FL 33024

## New Principal Place of Business:

PO BOX 422036  
KISSIMMEE, FL 34741

## Current Mailing Address:

PO BOX 246445  
PEMBROKE PINES, FL 33024

## New Mailing Address:

PO BOX 422036  
KISSIMMEE, FL 34741

FEI Number: 20-1281493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LAWRENCE, GRACE  
10467 SW 16TH ST  
PEMBROKE PINES, FL 33025 US

## Name and Address of New Registered Agent:

LAWRENCE, GRACE C  
669 MADRID DR.  
KISSIMMEE, FL 34741 US

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: GRACE C. LAWRENCE

04/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PV ( ) Delete  
Name: LAWRENCE, ROY  
Address: PO BOX 246445  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DS ( ) Delete  
Name: LAWRENCE, GRACE  
Address: PO BOX 246445  
City-St-Zip: PEMBROKE PINES, FL 33024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV (X) Change ( ) Addition  
Name: LAWRENCE, ROY  
Address: PO BOX 422036  
City-St-Zip: KISSIMMEE, FL 34741

Title: DS (X) Change ( ) Addition  
Name: LAWRENCE, GRACE C  
Address: PO BOX 422036  
City-St-Zip: KISSIMMEE, FL 34741

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: ROY LAWRENCE

PV

04/12/2005

Electronic Signature of Signing Officer or Director

Date