2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State 02-01-2007 90029 040 ***150.00 DOCUMENT # P06000104988 THE TARRANT CORPORATION, INC. 40008100 Mailing Address Principal Place of Business 1777 ARASH CIR 1777 ARASH CIR PORT ORANGE, FL 32128-7291 PORT ORANGE, FL 32128-7291 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 CR2E034 (12/06) Applied For 4. FEI Number City & State City & State 20-5391203 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRIAN R. TOUNG, P.A. Street Address (P.O. Box Number is Not Acceptable) 213 SILVER BCH AVE DAYTONA, FL 32118 City Zip Code 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 **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DPV ☐ Change TITLE TITLE Addition ☐ Oelete TARRANT, GEORGE E JR. NAME NAME 1777 ARASH CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORT ORANGE, FL 321287291 CHY-ST-ZIP DST Delete TITLE ☐ Change □ Addition TITLE TARRANT, MARY R NAME NAME STREET ADDRESS 1777 ARASH CIR STREET ADDRESS PORT ORANGE, FL 321287291 CITY-ST-ZIP CITY-ST-ZIP Change Delete 100 Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY ST ZIP ☐ Delete ☐ Channe Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete THLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete HILE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

FILED Feb 01, 2007 8:00 am

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

CITY-S1-ZIP

A. Tarrant 1 1-30-2000

CITY-ST-ZIP