PROFIT CORPORATION ANNUAL REPORT 1996			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS						
DOCUMENT # P20148 1. Corporation Name			(3)						
TARA	CON INC.					i kodijoor iya man bangi xigir ori	18: 18:1 8:21: 8:2	FAL BIBLE BAR	(1 111) (111)
23 MIAMI [e of Business DRIVE DID FL 33852	· N	tailing Address 23 MIAMI DRIVE LAKE PLACID FL 3385 US	· · · · · · · · · · · · · · ·					
						3. Date Incorporated or Qualified 07/20/1988	3a. Date	of Last F 5/01/19	Report
2. Principa! P	lace of Business	h1	. Mailing Address			4. FEI Number 36-3044536			Applied For
Suite, Apt.	#, elc.	26	Suite, Apt. #, etc		.,.	5. Certificate of Status Desired	П		Not Applicable 5 Additional
City & Stat	e	28	City & State			Election Campaign Financing Trust Fund Contribution		\$5.0	Required May Be
Zip 4	Country 25 9. Name and Address of Curre	29	Zıţı	30 Cou	intry	8. This corporation has liability for florida Statutes Yes			199.032
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familiar wi	to the provisions of Sections 607.050 red agent, or both, in the State of Flor ith and accept the obligations of, Sec	02 and 60 rida Such ction 607.	7.1508, Florida Statute change was authorize 0505, Florida Statutes.	es, the abo ed by the c	83 84 City ve named corporation's bos	ration submits this statement for the puricle of directors. I hereby ancept the app	FL rpose of cha ointment as		p Code egistered office Lagent Tani
familiar wi	ith and accept the obligations of, Sec Syndrom by editor protect name of respectives to se-	ction 607.	0505, Florida Statutes.	'E Beginterad	84 City	stwice eaching	rpose of cha ointment as	inging its r registered	egistered office Lagent Lam
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

| 445-274-|
| SIGNATURE | Cast | C

4/15/96 (941) 465-2740