

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90358 037 ***150.00

DOCUMENT # P33718

1. Entity Name
TARA GROUP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1800 Valley View Lane
Suite, Apt. #, etc.
2nd Floor

3. Mailing Address
P O Box 1398
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Dallas, Texas
Zip
75234
Country
USA

City & State
Addison, Texas
Zip
75001-1398
Country
USA

4. FEI Number
75-2290552
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
City
Plantation **FL** Zip Code
33324

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P**
NAME **Richard D. Morgan**
STREET ADDRESS **1800 Valley View Lane, 2nd Floor**
CITY- ST- ZIP **Dallas Texas 75234**

TITLE **STD**
NAME **Maria Blackburn-Morgan**
STREET ADDRESS **1800 Valley View Lane, 2nd Floor**
CITY- ST- ZIP **Dallas Texas 75234**

TITLE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard D. Morgan 04-30-02 (469) 522-4202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #