## **2005 FOR PROFIT CORPORATION ANNUAL REPORT** DOCUMENT # P9300000159 1. Entity Name TAO REALTY INVESTMENTS CORP. Princ 800 MIAN 2. Pr Su Ci Zi -TAC 800 MIA

**FILED** Feb 02, 2005 8:00 am Secretary of State

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MAM. FL 33138  MAML F			S	-	•							1	E 11 (1 A I	1.4.11.0
Subs. Apt. #, etc.       Sarto, Apt. #, etc.       O1192005       Chg. P       CR2E304 (10/03)         Dty & 5 late       Ciry & 5 late       A - El Number       Not Apicable         202       Country       & Control       Sector       Sector         4. El Number       Sector       Sector       Sector       Sector         5. Nume and Address of Current Registered Agent       7. Name and Address of Nam Registered Agent       Name         TAO, QUOC KY       Solid       Name       State Address (P.O. Box Number is Not Acceptable)         MAM, FL 33138       Ciry       FL       Zp Code         8. The above named entity success the intervent for the purpose of changing its registered office or registered agent, or both, in the State of Florda. Tam familiar with, and acceptable         SGNATURE       Direction Campaign Francing       S5.00 May go         After May 1, 2005 Fee with the 5550.00       9. Election Campaign Francing       S5.00 May go         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         THE       Double       Intit       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         THE       Double       Intit       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         THE       Double       Intit       ADDITIONS/CHANGES TO OFFICERS AND D														
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Zip         Country         Zip         Country         Sc. Centificate of Status Desired         St. 75 An Registed           Zip         Country         S. Centificate of Status Desired         St. 75 An Registed         Fine Registered Agent         7. Name and Address of Current Registered Agent         7. Name and Address of New Registered Agent           TAO. CUOC KY 8001 BISCATNE BLVD.         Name         7. Name and Address of New Registered Agent         7. Name and Address of New Registered Agent           ToO. CUOC KY 8001 BISCATNE BLVD.         Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)           MIAMI, FL 33138         City         FLE         Zip Code           Street Address (P.O. Box Number is Not Acceptable)         The object of registered agent of the purpose of changing its registered agent, or both, in the State of Portida. 1 am familiar with, and accept the object of registered agent.         Date           SIGNATURE         Text Even of Contraction.         B. Election Campaign Francing TaO. QUOC KY         S5.00 May Be Address in State Address to OFFICERS AND DIRECTORS In 11           Tric         D         OFFICERS AND DIRECTORS         11. Nate Find Contraction.         Address in State Address in Company   Address in State Address in Company   Address in State Address i	Suite, Apt.	#, etc.		Suite, Apt.	Suite, Apt. #, etc.				01192005	Chg-f	2	CR2E0	34 (10/03)	
	City & State			City & Stat	City & State									
TAO. OUOC KY 8001 BISCAYNE BLVD. MIAMI, FL 33138     Nome	Zip	Country					ntry		• •	·	<u> </u>	<u> </u>	Fee Require	
TAO: OUOC KY BODI BISCAVE BLVD.       Street Address (P.O. Box Number is Not Acceptable)         INMAN, FL 33138       City       FL       Zip Code         City       FL       Zip Code       City       FL       Zip Code         8. The above named only submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Plotda. 1 am formilar with, and accept the changing its registered agent, or both, in the State of Plotda. 1 am formilar with, and accept the changing its registered agent, or both, on the State of Plotda. 1 am formilar with, and accept the changing its registered agent, or both, on the State of Plotda. 1 am formilar with, and accept the change its registered agent ag		6. Name	and Address of Current	Registered Age	Int				7. Name and	Address o	1 New Reg	istered A	lgent	
BOOT BISCAYNE BLVD.       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       City       City       City       City         Street Address (P.O. Box Number is Not Acceptable)       City		~ KV				I	Name							
The above named entity submits this statement for the purpose of changing its registered algent, or both, in the State of Ponda. 1 am familiar with, and accept the obligatons of registered algent.     SIGNATURE	8001 BISC	AYNE BL	.VD.					dress (F	P.O. Box Numb	er is Not Ac	ceptable)			
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 Fonda. 1 am familiar with, and accept the bothpatine of registered agent.   SIGNATURE									<u></u>			FL	Zip Cod	le
Byzelane. Byzelane agent and ten lagoidable.     (NOTE: Registance Agent symptom sequence when instating)     DATE       FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.01     Image: Status instance ins				or the purpose of	changing its	registere	ed office or r	egistere	red agent, or bo	th, in the Sta	ate of Florid		 lamiliar with,	and accept
After May 1, 2005 Fee will be \$250,00       Trust Fund Contribution.       Added to Fees         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         TITLE       D       Int.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         TITLE       D       Int.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         TITLE       D       Int.       Addition         NME       STREET ADDRSS       Int.       Addition         STREET ADDRSS       Int.       Int.       Addition         NME       Int.       MAME       STREET ADDRSS       Int.         Int.       Int.       Int.       Addition       Int.       Addition         NME       Int.       Int.       Int.       Int.       Addition         NME       Int.       Int.       Int.       Int.       Addition         NME       Int.       Int.       Int.       Int.       Int.       Int.         NME       Int.	SIGNATURE_	ad Agent signature	e required	I when reinstating)			DATE							
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<ol> <li>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.</li> <li>SIGNATURE W</li> </ol>				- 24 • 1.1	901 ·									
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.		- artific that th	- i-formation supplied wit		- •			- in Co		(1) Elorída S	Notitoe   fi		+ify that the	information
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							ired by Uhap	ter 607	7, Florida Statute	es; and that	my name a	ippears ir המר		r Block 11 0