SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1996.
AMOUNT DUE ON OR BEFORE 5/0/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 26 AM 9:02

DOCUMENT # P93000048169 (5)

1. Corporation Name

TARGON, INC.

Principal Place of Business	Mailing Address
5177 3RD RD. LAKE WORTH FL 33467	5177 3RD RD. LAKE WORTH FL 33467

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/25/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21: 13214 82ND LANE NO.
22: Suite, Apt. #, etc:
23: City & State: West Palm Beach FL
24: Zip: 33412 25: Country: U.S.

2a. Mailing Address
26: 13214 82ND LANE NO.
27: Suite, Apt. #, etc:
28: City & State: West Palm Beach FL
29: Zip: 33412 30: Country: U.S.

4. FEI Number: 65-0424812 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WILLIAMS, JEFFREY C
5177 3RD RD.
LAKE WORTH FL 33463

10. Name and Address of New Registered Agent

81 Name: Williams, Jeffrey C.
82 Street Address (P.O. Box Number is Not Acceptable): 13214 82nd LANE NO.
83:
84 City: West Palm Beach FL 85 Zip Code: 33412

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 17		
TITLE	D	11 TITLE	D	☒ Change ☐ Addition
NAME	WILLIAMS, JEFFREY C	12 NAME	WILLIAMS, JEFFREY C	
STREET ADDRESS	5177 3RD RD.	13 STREET ADDRESS	13214 82 ND LANE NO.	
CITY-ST-ZIP	LAKE WORTH FL 33463	14 CITY-ST-ZIP	West Palm Beach FL 33412	
TITLE	D	21 TITLE	D	☒ Change ☐ Addition
NAME	WILLIAMS, WENDY	22 NAME	WILLIAMS, WENDY	
STREET ADDRESS	5177 3RD RD.	23 STREET ADDRESS	13214 82ND LANE NO.	
CITY-ST-ZIP	LAKE WORTH FL 33463	24 CITY-ST-ZIP	West Palm Beach FL 33412	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

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)(i), 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: Wendy Williams — Wendy Williams — 6/15/95 — 407 7969697
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0095825 CF