4/24/98 B - 5484 - C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P93000048169 (5)

TARGON INC

FILED Apr 24 1998 8:00am Secretary of State

I	011, 1110,							I NOTINOTA HID TUDOS ININ BONI BORNI BONI BONI BURNI BURNI INING BURNI HIS BURNI BURNI
Bringing Place of Stationers				NA COLOR				
Principal Place of Business			Mailing Address					· ••
13214 62ND LANE N WEST PALM BEACH FL 33412 US			W	13214 82ND LANE N WEST PALM BEACH FL 33412 US				DO NOT WRITE IN THIS SPACE
) 03			U	S				3. Date Incorporated or Qualified
								06/25/1993
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21				26				65-0424812 Not Applicable
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5 Certificate of Status Desired Status Desired Status Desired
22				27				Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
Zip Country		28	Zip Country				Trust Fund Contribution Added to Fees	
24		25	29	* 'h'	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	g, Name	and Address of Curre		ered Agent	1301			10. Name and Address of New Registered Agent
W	/ILLIAMS, JE	FEREY C				81	Name	
	3214 82ND					82	Stroot	Address (P.O. Box Number is Not Acceptable)
		BEACH FL 33412				02	Ollege	Address (r.o. box Number is Not Acceptable)
						83		
						84	City	85 Zip Code
						Ш		r <u>L</u>
I office or	renistered ar	cont. or both, in the Stat	e of Florid	la. Such change was	authoriz	rad ha	the corr	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
agent. I	am familiar w	ith, and accept the obli	gations of	, Section 607.0505, F	lorida St	atutes	5.	
SIGNATURE	Signature types	For printed name of nigistered a	nout and take	f applicable (NO	7E Register	red Ane	nt s.ocalure	e required when reinstating) DATE
12.		OFFICERS A			13		an o'g, Litare	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1	TITLE		Change Addition
NAME		MS, JEFFREY C			1.2	NAME		
STREET ADDRESS		32ND LANE N			1.3	STREET	ADDRESS	
CITY-ST-ZIP	WEST	PALM BEACH FL			1.4	CITY-S	T-21P	
TITLE	D			DELETE	2.1	TITLE		☐ Change ☐ Addition
NAME		MS, WENDY			2.2	NAME	- 1	
STREET ADDRESS		BAND LANE N			2.3	STREET	ADDRESS	
CITY-ST-ZIP	WEST	PALM BEACH FL		DELETE		CITY-S	ST - ZIP	
TITLE				☐ DECE IE		TITLE		☐ Change ☐ Addition
NAME	.]					NAME		
STREET ADDRESS	1						ADDRESS	
CITY+ST-ZIP TITLE	 			DELETE		CITY-S	11-211	Change Addition
NAME				La occur		NAME	ĺ	C Stillings C 10011011
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP						CITY - ST	- 1	
TITLE	 	· · · · · · · · · · · · · · · · · · ·		DELETE	_	TITLE		Change Addition
NAME						NAME		
STREET ADDRESS					- 1		ADDRESS	
CITY-ST-ZIP						CITY-SI		
TITLE				DELETE	_	TITLE		Change Addition
NAME					6.2	NAME		
STREET ADDRESS	:				6.3	STREET	address	
CITY-ST-ZIP	1				64	City-SI	T - 7IP	

14. Thereby 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 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 coreover 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 chapter 607, or on an appear with an address.

561-795-9697