FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000067544 (5)

TAURUS MARKETING INC.

Principal Place of Business Mailing Address 33223 US HWY 19 NORTH 33223 US HWY 19 SUITE 501 SUITE 501 PALM HARBOR FL 34684 PALM HARBOR FL							
					3. Date Incorporated or Qualified 09/23/1993	3a. Date of Last Report 03/18/1996	
· '	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt.	# etc	Suite, Apt, #, etc.			59-3204581	Not Applicable \$8.75 Additional	
22	r, 000	27	·		5. Certificate of Status Desired	Fee Required	
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be	
23	T Co. white	28	Country		Trust Fund Contribution	Added to Fees	
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has liability for in	ntangible tax under s. 199.032,	
9. Name and Address of Current Registered Agent			1001		10. Name and Address of New Registered Agent		
HAL	L, VANITA		61	Name			
	23 US HWY 19 NO., S-501		82 Street Addre		ress (P.O. Box Number is Not Acceptab	le)	
PALI	M HARBOR FL 34684		63		***************************************		
			63				
			84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	tes, the abov	e-named corp	poration submits this statement for the p		
office or r agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was ligations of, Section 607.0505, F	authorized b Iorida Statute	y the corporal is.	poration submits this statement for the p tion's board of directors. I hereby accep	it the appointment as registered	
SIGNATURE.							
12.	Signature typed of printed name of registered a	agent and little if applicable (NO NDD DIRECTORS	TE: Registered Ag	ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	PATE PERS AND DIRECTORS IN 12	
TITLE	D OFFICENS A	DELETE	1.1 TITLE		ADDITIONS/OFFICE TO OFFICE	Change Addition	
NAME	HALL, JOHN A.		1.2 NAME				
STREET ADDRESS	33223 U S HWY 19 N STE 5	501	1.3 STREE	1 ADDRESS			
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY -	ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE		•	Change Addition	
NAME			2.2 NAME			7.	
STREET ADDRESS			2.3 STREET ADDRESS		·		
CITY-S1-ZIP	OXFORD EN		2.4 CITY-	ST-ZIP	 		
TITLE	P HALL MANITA	DELETE	3.1 TITLE			☐ Change ☐ Addition	
NAME DYDGET ADDRESS	HALL, VANITA 33223 US HWY 19 N STW 5	:10	3.2 NAME	1	4.		
STREET ADDRESS	DALLA HARRON EL			T ADDRESS			
CITY-ST-ZIP TITLE	I NUM I PUDITON FL	DELETE	3.4. CITY- 4.1 TITLE	51-ZP	***************************************	Change Addition	
NAME		beleve	4.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-	1			
TOTLE			5.1 TITLE		**************************************	Change Addition	
NAME	•••		5.2 NAME			·	
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			62 NAME				
STREET ADDRESS			6.3 STREE	1 ADDRESS			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP		·	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), Florida Statutes. I further certify that the information indicated on this armual 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 11 if ghanged, or officer with an address.

SIGNATURE:

FILED

Feb 13 1997 8:00am

Secretary of State