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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

## DOCUMENT # P93000088072 (2)

T.A.G. MANUFACTURING & DEVELOPMENT CORPORATION

Principal Place of Business			Mailing Address				T (Bestebs the 1819e since Meste Obins about saver inter about saver inter				
1282 MARKET CIRCLE		1282	1282 MARKET CIRCLE								
UNIT 2			UNIT 2								
PT. CHARLOTT	E FL 33953		HARLOTTE FL 3395	3-3826						<del></del>	
US		US						3. Date Incorporated or Qualified 12/20/1993		te of Last 1/1996	Report
2. Principa <sup>1</sup> f	Place of Business	2a. N	Aailing Address					4. FEI Number			Applied For
21		26	26				65-0454267			Not Applicable	
Scile, Apt	#, etc	5	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional
22		27						5. Certificate of Status Desired	لسا	Fee I	Required
Crty & Sta	le	C	City & State					6. Election Campaign Financing		\$5.0	May Be
23		28						Trust Fund Contribution			d to Fees
Ζφ	Country	Z	Zip	C	ountry			8. This corporation has liability for i	ntangible	tax under	s. 199.032,
24	25	29		30				Florida Statutes	Yes [	] No	
	9, Name and Address of Curre	ent Registe	red Agent					10. Name and Address of New Re	gistered /	\gent	
TRO	TTER, THOMAS J				81	Nam	e				
291	WABASH TERR.				Ctrop Aride			ss (P.O. Box Number is Not Acceptab			
	T CHARLOTTE FL 33954				82 Street Addre			ss (P.O. box Number is Not Acceptab	iie)		
1					83						······································
					84	City			FL	85 Zip	o Code
<b>44</b> (2) consent	to the are injure of Sections 607.05	02 and 607	1500 Elevide Stat	tuton tha	nbou(	. name	d corec	pration submits this statement for the p		abanaina	ite registered
office or	registered agent, or both, in the Stal	te of Florida	<ul> <li>Such change was</li> </ul>	s authori	zed by	the c		on's board of directors. I hereby accep			
agent L	am tamiliar with, and accept the obli	gations of, §	Section 607.0505, F	Florida \$	tatutes	<b>\$</b> .		·			-
SIGNATURE											
	Signic typed or punited name or registered a					nt signat	ure required	d when reinstaling)	DATE		******
12.	OFFICERS A	ND DIRECT			3.			ADDITIONS/CHANGES TO OFFICE	ERS AND		
TIFLE	P		DELETE	1.7	1 TITLE		- }			Change	Addition
NAME	TROTTER, THOMAS J			1.2	2 NAME		1				
STREET ADDRESS	291 WABASH TERR.			1.3	3 STREET	ADDRES	s				
CHY-ST ZIF	PT CHARLOTTE FL 33954			1.4	4 CITY-S	T-ZIP	1				
THLE	ST		DELETE	2	1 TITLE					☐ Change	Addition
NAME	TROTTER, FAY T			2.	2 NAME						
SUBSET ADDRESS	291 WABASH TERR.				3 STREET	ADDRES					
CHY-SI-20	PT CHARLOTTE FL 33954				4 CITY - S		<b>*</b>				
TITLE			DELETE		4 GITTLE	51- ZIF				Change	Addition
			C) DECEN				ļ				/ La riddition
NAME					2 NAME		.				
STREET ADDRESS				3.	3 STREET	ADDRES	\$				
CHY-ST ZIP					4. CITY - S	ST-ZIP	_				
THEE			☐ DELETE	4.1	1 TITLE		- [			L Change	Addition
NAME				4.	2 NAME						
STREET ADDRESS				4.	3 STREET	ADDRES	s				
CITY - ST - ZIP				4.4	4 CITY-S	T-ZIP					
TITLE			DELETE		1 TITLE		1			Change	Addition
NAME				5:	2 NAME					_	
STREET ACIDRESS					3 STAEET	Annore					
1				3			1				
CITY ST-75			Driett		4 CITY - S	11 - ZIP				Change	Addition
TITLE			☐ DELETE		1 TITLE					Change	- L Audition
NAME					2 NAME						
STREET ADDRESS				6.	3 STREET	ADDRES	s				
C/TY-S1-2/P	1				4 CITY-S						
	ship earlify that the information cumpl	ied with this	filing does not au	alify for t	he exe	mption	stated	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega	s. I further	certify the	at the

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.