FILE NOW: FILING FEE AFTER MAY 1 IS \$550,0

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT É STATE

Sandra B. Morthm

Secretary of State
DIVISION OF CORPORATIONS

1997

DIVISION OF POA(0)

FILED Feb 03 1997 8:00am Secretary of State

DOCUMENT # P940000 THAROO INTERNATIONAL, INC.	006797 (2)			Y
Principal Place of Business	Mailing Address			BY ORDER OFFICE OFFICE OFFICE OFFICE OFFI
124 W PINE ST SUITE 132 ORLANDO FL 32801 US	124 W PINE ST SUITE 132 ORLANDO FL 32801-2652 US	1	Date incorporated or Qualified	3a. Date of Last Report
	00		01/19/1994	02/02/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3266128	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zıp	Coury	8. This corporation has liability for	
24 25	29	30	Florida Statutes	Yes No
9. Name and Address of Current	Registered Agent	1 Name	10. Name and Address of New Re	egistered Agent
A.G.C. CO.		I IVairie		
200 S ORANGE AVE #2300		2 Street Add	dress (P.O. Box Number is Not Acceptal	ble)
ORLANDO FL	131			
ONDANDO I E				
		4 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State or agent. I am familiar with, and accept the obligation.	and 607, 1508, Florida Statute f Florida Such change was a ons of, Section 607,0505, Flo	s, the abive-named cor uthorizedby the corpora rida Statiles.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
SIGNATURE: Signature, typed or punited name of registered agent.	and titic if applicable (NOTE	: Registered gent signature requ	ulred when reinstating)	DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE P	☐ DELETE	1.1 TITÉ		Change Addition
NAME THAROO, ABDUL R		1.2 NAME		
STREET ADDRESS 6817 EDGEWORTH DR		1.3 STREET ADDRESS		
CITY-ST-ZIP ORLANDO FL	DELETE	1.4 CIT - ST - ZIP		
NAME	☐ DELETE	2.1 TITUE		Change Addition
STREET ADDRESS		2.2 NANE		·
CITY-S1-ZIF		2 3 STREET ADDRESS		
MILE	DELETE	2 4 CHY-ST-ZIP 3 1 TITLE		Change Addition
NAME		32 NANE		Series Series Print Constitution
SYREET ADDRESS		33 STREET ADDRESS		
CITY - ST - ZIP		3.4. City-St-ZiP		
TITLE	DELETE	4.1 TITUE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CTY-ST-ZIP		4.4 CITY - ST - ZIP		
TOTALE	DELETE	5.1 TITLE		Change Addition
NAME CTUES ACCORDED		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
City-St-ZiP				l
19166	Delete	5.4 CITY-ST-ZIP		Chara Little
NAME	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		☐ Change ☐ Addition

CITY-SI-ZIP
6.4 CITY-SI-ZIP
14. I do 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 annual report or examplemental 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 changes by on an attachment with an address.

SIGNATURE:

THAROO JAN-14-97