

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000074646

FILED
Jan 13, 2005
Secretary of State

Entity Name: TABARES BROTHERS, INC.

Current Principal Place of Business:

13603 SW 26TH ST
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

13603 SW 26TH ST
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-0529075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE SANTOS, NANCY TABARES
16044 S.W. 44 LANE
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TABARES, FRANCISCO
Address: 9137 SW 167 CT
City-St-Zip: MIAMI, FL 33196

Title: VP () Delete
Name: DE SANTOS, NANCY TABARES
Address: 16044 S.W. 44 LANE
City-St-Zip: MIAMI, FL 33185

Title: T () Delete
Name: TABARES, MARCIA
Address: 9251 S.W. 167 COURT
City-St-Zip: MIAMI, FL 33196

Title: STD () Delete
Name: TABARES, MARCIA
Address: 9251 S.W. 167 COURT
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCIA TABARES

ST

01/13/2005

Electronic Signature of Signing Officer or Director

_____ Date