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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # P94000086656 (3) TAVERNEER GROUP, INC. Principal Place of Business Mailing Address 251 ROYAL PALM WAY C/O LAWRENCE RAFFERTY 550 MAMARONECK AVENUE. SUITE 209 PALM BEACH FL 33480 HARRISON NY 10528-1612 3. Date Incorporated or Qualified 3a. Date of Last Report 11/30/1994 09/27/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0536326 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution П Added to Fees 23 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RICCA, JR., C. BROOKS **500 SOUTH AUSTRALIAN AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 800 83 W PALM BEACH FL 33401 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 96/6 TITLE ☐ DELETE 1.1 TITLE Change Addition NAME 1.2 NAME RAFFERTY, LAWRENCE **CR2E034** STREET ADDRESS 1.3 STREET ADDRESS 550 MAMARONECK AVENUE, SUITE 209 CITY - ST - 7IP HARRISON NY 10528 1.4 CITY - ST - ZIP DELETE Change ___ Addition TITLE 2.1 TITLE NAME 2.2 NAME KENNEDY, PATRICIA STREET ADDRESS 251 ROYAL PALM WAY 2.3 STREET ADDRESS CITY-\$1-ZIP PALM BEACH FL 33480 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7iP 5.4 CITY - ST - ZIP □ DELETE Change Addition THLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 64 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(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 corporation or the receiver or trustee empreyered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the corporation or the reappears in Block 12 or Block 13 if changed or on a

LARRY RAFFERTY 2/11/97

FILED

Feb 18 1997 8:00am