

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

FILED

Apr 30 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000049213 (8)

1. Corporation Name

TAMARGO ENTERPRISES, INC.

Principal Place of Business

8557 S.W. 207TH TERRACE  
MIAMI FL 33189

Mailing Address

8557 S.W. 207TH TERRACE  
MIAMI FL 33189

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1995

4. FEI Number

65-0596601

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 12224 SW 263 TR

2a. Mailing Address

26 12224 SW 263

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 HOMESTEAD

City & State

28 HOMESTEAD

Zip

24 33032

Country

25 NADE

Zip

29 33032

Country

30 NADE

9. Name and Address of Current Registered Agent

VILLASANTE, ROBERTO  
44 WEST FLAGLER ST.  
SUITE 1700  
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

VIOLETTA WHITING - PRESIDENT

4/23/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP  
STREET ADDRESS WHITING, VIOLETTA  
CITY-ST-ZIP 8557 SW 207TH TERR  
MIAMI FL

TITLE ☐ DELETE

NAME VP  
STREET ADDRESS TAMARGO, MANUEL  
CITY-ST-ZIP 8557 SW 207TH TERR  
MIAMI FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 12224 S.W. 263 TERRACE

1.4 CITY-ST-ZIP HOMESTEAD, FL 33032

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 12224 SW 263 TERRACE

2.4 CITY-ST-ZIP HOMESTEAD, FL 33032

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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.

SIGNATURE:

Violetta Whiting 4/24/98 305-759-6855

CR2E034 (10/97)