


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 25, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000000534**

1. Entity Name  
 TACOLCY PARK VIEW, INC.



|  |  |
|--|--|
| Principal Place of Business<br>675 NW 56TH ST<br>BLDG C<br>MIAMI, FL 33127 | Mailing Address<br>675 NW 56TH ST<br>BLDG C<br>MIAMI, FL 33127 |
|--|--|

**DO NOT WRITE IN THIS SPACE**



01192007 No Chg-P CR2E034 (11/05)

|  |                                       |
|--|---------------------------------------|
| 4. FEI Number<br>65-0726139  | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

GARDNER, CAROL  
 675 NW 56TH STREET  
 BUILDING C  
 MIAMI, FL 33127

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE 01/29/07-80014-006 158.75

Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>CAROL, GARDNER<br>675 NW 56TH STREET, BLDG. C<br>MIAMI, FL 33127    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | VP<br>KELLY, ANGELA R<br>675 NW 56TH STREET, BLDG. C<br>MIAMI, FL 33127  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | C<br>FLORENCE, MOSES<br>675 N.W. 56TH STREET, BLDG. C<br>MIAMI, FL 33127 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carol Gardner **CAROL GARDNER** 1/22/07 305-757-3737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #