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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600053437 (5)

TAG TATTOO, INC.

Principal Place of Business Mailing Address

APPROVED AND FILED

1997 JAN 31 AM 11: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



						1			
75 E. COLONIA ORLANDO FL S		75 E. COLONIAL DR. ORLANDO FL 32801-1238							
						3. Date Incorporated or Qualified	3a. Dat	e of Last R	teport
						06/21/1996	-	0 0 200 1	
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26				159-3391110			ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.							Additional
22		27				Certificate of Status Desired			equired
City & State	е	City & State		******		6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zφ	Cou	intry		8. This corporation has liability for i		-	. 199.032,
24	25	29	30	,	·		,	No.	
	9. Name and Address of Curr	ent Registered Agent		241		10. Name and Address of New Re	gistered A	gent	
	DERSON, THERESA			81	Name	4			•
	E. COLONIAL DR.	•		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		······································
ORL.	.ANDO FL 32801								
	•			83		4			
				84	City			85 Zip	Code
							FL	<u> </u>	
11. Pursuant t	to the provisions of Sections 607.0	502 and 607,1508, Florida S	Statutes, the at	bove	e-named corp	poration submits this statement for the p	urpose of a	changing it	ts registered
agent 1 at	im familiar with, and accept the ob-	igations of, Section 607.050	5, Florida Stat	tutes	тию согрога: В.	tion's board of directors. I hereby accept	i the appe	minimoni do	registered
SIGNATURE									
CIGHATOTE	Signature, typed or printed name of registered	agent and tide if applicable	(NOTE Registere	d Age	ent signature requi	ired when reinstating)	DATE		,
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	_ 		
TITLE	D/P	L DELETE	1.1 11	TLE			l	Change	Addition
NAME	ANDERSON, THERESA		1.2 N/	AME		•			
STREET ADDRESS	75 E. COLONIAL DR.		1.3 ST	REET	ADDRESS				
C/TY+ST-ZIP	ORLANDO FL 32801		140	ITY-S	T-ZIP				
TITLE	D # 1/ 13		1,4 (2)						
IIIE	D / V. P.	☐ DECETE		TLE	İ	<u>, , , , , , , , , , , , , , , , , , , </u>		Change	Addition
NAME		DELETI						Change	L Addillor
	GILLIS, GARY 75 E. COLONIAL DR.	☐ DELETE	2.1 TU 2.2 N/	AME	ADDRESS		<u></u>]	Change	L. Addition
NAME STREET ADDRESS	GILLIS, GARY 75 E. COLONIAL DR.	☐ DECETE	2.1 T/ 2.2 N/ 2.3 S1	ame Treet	ADDRESS ST-ZIP			Change	Addillion
NAME	GILLIS, GARY	☐ DELETE	2.1 TO 2.2 N/ 2.3 SI 2.4 C	AME TREET			Y.	Change Change	
NAME STREET ADDRESS CITY - ST - ZIP	GILLIS, GARY 75 E. COLONIAL DR.		2.1 TO 2.2 N/ 2.3 SI 2.4 C	AME TREET STY-S TLE			32		
NAME STREET ADDRESS CITY-ST-ZIP TITLE	GILLIS, GARY 75 E. COLONIAL DR.		2.1 TI 2.2 NJ 2.3 SI 2.4 C 5.3 TI 3.2 NJ	AME TREET HTY-S TLE AME			32		
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4. 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 empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if planged, or on an attachment with an address.

SIGNATURE:

Mein 2 Andre CI THERES A ANDERSON 1/10/97 407-839-00