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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000070355 (8)

TARALLO IMPORTS, INC.

4435 OLD WINTER GARDEN ROAD

ORLANDO FL 32802

Principal Place of Business

4435 OLD WINTER GARDEN ROAD 4435 OLD WINTER GARDEN ROAD ORLANDO FL 32802 ORLANDO FL 32811-4240 3. Date Incorporated or Qualified 3a. Date of Last Report 08/23/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Not Applicable 26 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 23 Trust Fund Contribution Added to Fees 2₿ Zιρ Country Country Zip This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes X No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BLUMBERGEXCELSIOR CORPORATRE SERVICES INC.

City 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. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.

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

| SIGNATURE | • | | | | | |
|-----------------|--|-----------|--------------------------|---|----------|------------|
| | Signature, typed is protect havie of registered agent and little if applicable | (NOTE: Re | g stered Agent signature | required when reinstating) | DATE | |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TILE | | DELETE | 1,1 TITLE | | ☐ Change | ☐ Addition |
| NAME | TARALLO, DIEGO | | 1.2 NAME | | | |
| STREET ADDRESS | 8813 17TH AVENUE | | 1.3 STREET ADDRESS | | | |
| CITY-ST-7IP | BROOKLYN NY 11214 | | 1.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 2.1 TITLE | | ☐ Change | Addition |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | <u>.</u> | |
| CHY-SI-7P | | | 2 4 CITY-SY-ZIP | | | |
| TITLE | | DELETE | 3.1 TITLE | | Change | Addition |
| NAME: | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | |
| City St-ZiP | | | 3.4. CITY-ST-ZIP | | | |
| THUE | | DELETE | 4.1 TITLE | | ☐ Change | Addition |
| NAME | | | 4. 2 NAME | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | |
| City-St-7# | | | 4.4 CITY-ST-ZIP | | | |
| THUE | | DELETE | 51 TiTLE | | ☐ Change | Addition |
| NAME | | | 52 NAME | | ÷ | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | |
| C(TY-ST-ZIP | | | 5.4 CITY - ST - ZIP | | | |
| TITLE | | DELETE | 6.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | | | 62 NAME | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | , |
| C(1Y - S1 - Z(P | | | 6.4 CITY - ST - ZIP | | | |

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

SIGNATURE:

TARALLO

FILED

May 15 1997 8:00am

Secretary of State

Zip Code