**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600070355

1. Corporation Name

TARALLO IMPORTS, INC.

## May 11, 1999 8:00 am Secretary of State

05-11-1999 90021 050 \*\*\*150.00



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Principal Plac	e of Business	Mailing Address				,,,,		•111 •111) •111		
4435 OLD WINTER GARDEN ROAD 4435 OLD WINTER GARDEN ROAD						İ				
ORLANDO FL 32802 ORLANDO FL 32802							DO NOT	WRITE IN THI	S SPACE	
						3 Date Inc	corporated or Qua		0 01 71012	
						08/23/				
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Nur				Applied For
21		26				22-35	<u> 87350                                    </u>			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				€ Certifca	te of Status Desir	ed 🔲		Additional
22		27				5, comina				Required
City & Stat	le	City & State					Campaign Finan	cing	•	May Be
23	Country	28 Zip	Col	intry			and Contribution			d to Fees
Zip	Country Zip			nin y		8. This corporation owes the current year Intangible Personal Property Tax. Yes				
24	25 25 25 26 26 26 26 26 26 26 26 26 26 26 26 26	rent Registered Agent	30				ind Address of	lew Registere		
				81	Name	.0,		<u>-</u> ·		
BLU	MBERGEXCELSIOR CORPORA	ATRE SERVICES INC.		02	Charact Address	00 (D C Pr	Number is Not 25	veentable)		
4435 OLD WINTER GARDEN ROAD				82	Street Addre	Address (P.O. Box Number is Not Acceptable)				
ORL	ANDO FL 32802			83						
				84	City				. 85 Zi	p Code
				1	•			F	L   ¯	·
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Stati	utes, the a	bove	-named corpo	oration submits	this statement for	or the purpose	of changing	its registered
office or a agent. I a	registered agent, or both, in the Starm familiar with, and accept the ob	ate of Florida. Such change was ligations of, Section 607.0505, F	autnorize Iorida Stat	utes.	ne corporatio	n s board or di	rectors. I hereby	accept the app	Olliuneni as	registered
SIGNATURE		•								
SIGNATURE	Signature, typed or printed name of registered		TE. Registered	Agent	signature required			DATE		
12.		AND DIRECTORS	13.			ADDITIO	NS/CHANGES T	O OFFICERS A	ND DIRECT	
. TITLE	D DIFFOR	☐ DELETE	1.1 Ti		17	ARALLO	DIEGO 77 TH		_ Chang	e
NAME	TARALLO, DIEGO		1.2 N			1824	77 74	S TREE	1	
STREET ADDRESS	8613 17TH AVENUE BROOKLYN NY 11214		ľ		ADDRESS	2000	LYN N	14 112	14	
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NAME					ADDRESS					
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CITY-ST-ZIP TITLE		☐ DELETE	3.1 T		-"				Chang	je 🔲 Addition
NAME			3.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			3.4. (	ITY-ST	r-ZIP					
TITLE		☐ DELETE	4.1 T	TLE					☐ Chang	e Addition
NAME			4.21	IAME						
STREET ADDRESS			438	TREET	ADDRESS					
CITY-ST-ZIP		<u></u>	4.4 C	ITY-ST	-ZIP					
TITLE		☐ DELETE	5.1 T						Chang	ge Addition
NAME			52 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				ITY-ST	-ZIP					
TITLE		☐ DELETE	6.1 T						Chang	ge Addition
NAME			6.2 N							
STREET ADDRESS					ADDRESS					
1	i e		■ 64C	ITY-ST	- /ID					

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, with all other like empowered.

SIGNATURE:

TARALLO

212-8189150