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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra 8. Moitham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000099875 (2)

THE TARTAN GROUP, INC.

## FILED Apr 25 1997 8:00am Secretary of State



Principal Place of Bus	siness	Mailing Addres	s			I FREGURDA HID TOMER BUTAN DEGIN BODIN BEHAD TRUM DOTTON JOHAN HOLD AFAN FRANK		
1572 SW 6TH CT BOCA RATON FL 33486		1572 SW 6TH CT BOCA RATON FL 33486-7032						
						Date Incorporated or Qualified     3a. Date of Last Report     12/10/1996		
2, Principal Place of Business		<b>2a.</b> Mailing Add	lress			4. FEI Number Applied Fo		
Sulte, Apt. #, etc.		26   Suite, Apt. #	Lata			65-0126925 Noi Applic		
22		27 Suite, Apr. +	r, eld.			5. Certificate of Status Dosired S8.75 Additional Fee Regulred		
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution		
Zip	Country	Zip	C	ountry	/	8. This corporation has liability for intangible tax under s. 199.03		
24	25	29	30			Florida Statutes Yes No		
9, N	ame and Address of Cur	rent Registered Agent			r	10. Name and Address of New Registered Agent		
SPENCER,				81	Namo	nc		
1572 SW 6				82	Street	et Address (P.O. Box Number is Not Acceptable)		
BOCA RATO	ON FL 33486							
				83				
				84	City	85 Zip Code		
				<u>ا</u>	Ĺ	ed corporation submits this statement for the purpose of changing its registe		
agent. I am tamili SIGMATURE	ar with, and accept the ob-	digations of, Section 607	'.0505, Florida S	itatute	S.	orporation's board of directors. I hereby accept the appointment as registers		
12.	OFFICERS :	AND DIRECTORS	1	3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		□ t	ELETÉ 1.	TITLE		PRESIDENT Change SAND  TAMES. G. SPENCER  S 1572 SW 6TH COURT  BOCA RATON, FL. 33486		
NAME			1.	2 NAME		DAMES, G. SPENCER		
STREET ADDRESS			] 1	3 STHEET	ADDRESS	8 1572 SW 6TH COVER		
CITY-ST-ZIP				4 CITY-S	ST-ZIP	BOCA RATON, FL. 33486		
TITLE		1	ELETE 2	1 TITLE		Change Ado		
NAME			2.	2 NAME				
STREET ADDRESS			2.	3 STREET	ADDRESS	s		
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NAME				2 NAME				
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NAME		L1 U		2 NAME		- Stierige - Aut		
STREET ADDRESS			<b>1</b>		ADDRESS	s		
CITY-ST-ZIP				3 SINCCI 4 CHTY-9				
TITLE				1 TITLE	71 - 210	Change Add		
NAME			1	2 NAME				
- STREET ADDRESS					ADDRESS	s		
CITY-ST-ZIP				4 CITY - S				
	v that the information supr	lied with this filing does				n stated in Section 119.07(3)(i). Florida Statutes. I further certify that the		

Information indicated on this annual reprince with this ming does not qualify in the exemption is a required to the same legal effect as if made under eath; 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 toyanged, or on an attachment with an address.