PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000043834 (5)

**FILED** Jan 16 1998 8:00am Secretary of State

TAG PROPERTIES USA, INC.						
Principal Place of Business Mailing Address						L INCOMO DE LINE REPRESENTATION DE LA CONTRACTOR DE LA CO
943 ALLEGRO LANE 943 ALLEGRO LANE						
APOLLO BEACH FL 33572  APOLLO BEACH FL 33572					DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified
						05/19/1997
2. Principal P	face of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-3446866 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired  \$8.75 Additional
22		27 Ch. 2 State				5. Certificate of diatos besited Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip Country			,	8. This corporation owes or has paid the current year intangible
24	25	29	30			Personal Property Tax due June 30. Yes X No
24	g. Name and Address of Curre			301		10. Name and Address of New Registered Agent
ANS	ERILAWYER CHARTERED		•	81	Name	
	ENLAWTER CHARTERED  B ALMERIA AVENUE			-	<u> </u>	ROGER CLARK
		82	Street Addre	PDGER CLARK ess (P.O. Box Number is Not Acceptable) 43 ALLEGRO LANE		
"	RAL GABLES FL 33134			83		13 / 11 16 (6) 190 -
				84	City A	POLLO BEACH FL 85 Zip Code 33572
11 Pursuant	to the provisions of Sections 607.05	02 and 607.1508, F	Florida Statute	s, the above	s-named corp	poration submits this statement for the purpose of changing its registered
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 register 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. I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes.						
						1/7/08
SIGNATURE	ROGER LLARK, Signature, typed or printed name of registered ag	rentand the application	ALO (NOTE	Registered Age	ent signature require	ed when reinstating) DATE
12.		ND DIRECTORS		13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	I	DELETE	1.1 TITLE		Change Addition
NAME	Tustin, George W			1.2 NAME		
STREET ADDRESS	943 ALLEGRO LANE		1.3 STREET ADDRES		ADDRESS	
CITY-ST-ZIP	APOLLO BEACH FL 33572			1.4 CITY-ST-ZIP		
TITLE	VD	L	DELETE	2.1 TITLE		Change Addition
NAME	CLARK, VERONICA A			2.2 NAME		
STREET ADDRESS	943 ALLEGRO LANE			2.3 STREET	ADDRESS	
CITY - ST - ZIP	APOLLO BEACH FL 33572			2. 4 CITY-	ST-ZIP	1 ( J.
TITLE	STD		DELETE	3.1 TITLE		Change Addition
NAME	CLARK, ROGER L			3.2 NAME		
STREET ADORESS	943 ALLEGRO LANE			3.3 STREET	ADDRESS	
CiTY - ST - ZIP	APOLLO BEACH FL 33572			3,4. CITY-5	ST-ZIP	
TITLE		L	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP		<u></u>		4.4 CITY - S	T-ZIP	l a Classe
TITLE		L	DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY - S	T-ZIP	Table   Tabl
TITLE		Ĺ	DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET	ADDRESS	
CITY-ST-ZIP				6.4 CITY - S		
to the section	sid - share share lade-care as a constitute of a	with this filing door	not qualify for	the evenn	tion stated in	Section 119 07(3)(i) Florida Statutes, I further certify that the information

h this filing does not quality for the exemption stated in Section 19.07(3)(i), Florida Statutes. Further definy that the information 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 ever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

813-641-0003