2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 19, 2006 08:00 AM Secretary of State DOCUMENT # P97000068496 Entity Name TARRAGONA, INC. Mailing Address Principal Place of Business 255 S ORANGE AVE SUITE 1700 255 S ORANGE AVE **SUITE 1700** ORLANDO, FL 32801 ORLANDO, FL 32801 01302006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3469031 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE ROSS, THOMAS T 255 S ORANGE AVE **SUITE 1700** IN THIS SPACE ORLANDO, FL 32801 3. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 3. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS TITLE U0000005189**5**3 NAME AUFSEESSER, ERNST 05/02/06-80035-004 150.00 20. CH. COLLADON, CH-1209 GENEVA STREET ADDRESS CITY-ST-ZIP SWITZERLAND. TD KURZ, PETER NAME STREET ADDRESS 35, CH. DE LA SEYMAZ, CH-1253 VANDOEUVRES CITY-ST-ZOP SWITZERLAND, TITLE WEBER, JEAN-PIERRE NAME STREET ADDRESS BELCHENSTRASSE 19, CH-4054 BASEL DO NOT WRITE SWITZERLAND, CITY-ST-ZIP IN THIS SPACE TITLE PD HAME ROSS, THOMAS T 255 S ORANGE AVE STREET ADDRESS CKTY-ST-ZKP ORLANDO, FL 32801 me SAATHOFF, DWIGHT D NAME

12. I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is tribe and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or discourse 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIF

NAME STREET ADDRESS CITY-ST-ZIP

255 S. ORANGE AVE.

ORLANDO, FL 32801

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

FILED