Applied For

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000076769**

1. Corporation Name

TARA OF BOCA RATON, INC.

Principal Place of Business	Mailing Address			
1386 SOUTH FEDERAL HIGHWAY POMPANO BEACH FL 33062	1386 SOUTH FEDERAL HIGHWAY POMPANO BEACH FL 33062			
2. Principal Place of Business	2a. Mailing Address 26 384NW 35TH PL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/04/1997 4. FEI Number

65-0778948

FILED Feb 22, 1999 8:00 am Secretary of State 02-22-1999 90102 022 ***150.00

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22		27		5. Octabale of Glada Bosilos	Fee Required		
City & Stat	e	City & State	,	6. Election Campaign Financing	\$5.00 May Be		
23		28 BOCA RATON	FL	Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year	ar Intangible 🗼		
24	25	29 33431 30] P.B	Personal Property Tax.	Yes No		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	ered Agent		
TAR	ASITING IOUNI		81 Name		•		
	ANTINO, JOHN		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable).			
	S SOUTH FEDERAL HIGHWAY		384 NW 35TH PL				
POM	IPANO BEACH FL 33062		83				
			84 City		85 7in Code		
			°° 5""B0	CA RATON	FL ~ 337/3/		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named com	poration submits this statement for the purpo-	se of changing its registered		
office or r	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was autho	orized by the corporation	on's board of directors. I hereby accept the	ipportiment as registered		
•	an actual with and accept the obligation	0 0., 000mm 001.0000, Florida					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	gistered Agent signature require	ed when reinstating) DA	TE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER			
TITLE	P/D	☐ DELETE	11 TITLE	•	Change		
NAME	TARANTINO, JOHN		1.2 NAME	WALL STUDY	- 1		
STREET ADDRESS	1386 SOUTH FEDERAL HIGHWA	AY	1.3 STREET ADDRESS	384 NW 35THPL	1		
CITY-ST-ZIP	POMPANO BEACH FL 33062		1.4 CITY-ST-ZIP	30CARATON FL 3343	<i>/</i>		
TITLE	S/D	☐ DELETE	2.1 TITLE	3 OCARATON FL 3343	☐ Change ☐ Addition		
NAME	TARANTINO, ROBERTA M		22 NAME		,,		
STREET ADDRESS	AND COURT PEDEDAL INCURA	ΑÝ	2.3 STREET ADDRESS 3	184 NW 35TH PL			
CITY-ST-ZIP	POMPANO BEACH FL 33062		2.4 CITY-ST-ZIP	384 NW 35TH PL BOCA RATON FC 3343/			
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
			3.4. CITY-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME	<u> </u>			
STREET ADDRESS			4.3 STREET ADDRESS				
			4.4 CITY-ST-ZIP				
CITY-ST-ZIP	I				☐ Change ☐ Addition		
		☐ DELETE	5.1 TITLE				
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME				
TITLE NAME		☐ DELETE					
TITLE NAME STREET ADDRESS		☐ DELETE	5.2 NAME 5.3 STREET ADDRESS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.2 NAME		Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE				

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: