2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 27, 2007 08:00 All Secretary of State DOCUMENT # P98000034998 THE TAPER GROUP, INC. Principal Place of Business Mailing Address 1260 E. OAKLAND PARK BLVD. 1260 E. OAKLAND BLVD. FORT LAUDERDALE, FL 33334 FT. LAUDERDALE, FL 33334 04032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0829452 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent JUDITH A. JARVIS DO NOT WRITE 1260 E. OAKLAND PARK BLVD SUITE 200 IN THIS SPACE FORT LAUDERDALE, FL 33334 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE GALLANT, GLENN M NAME STREET ADDRESS 1260 E OAKLAND PARK BLVD U000000736130 FORT LAUDERDALE, FL 33334 CITY-ST-7IP 05/10/07-80064-005 150.00 TITLE NAME STREET ADORESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-\$T-ZIP TITLE NAME STREET ADDRESS

12. I hereby 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 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 exegute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED