

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000005549

1. Entity Name
TARA'S RENOVATIONS, INC.



Physical Address
**21681 FALL RIVER DRIVE
BOCA RATON, FL 33428**

Mailing Address
**21681 FALL RIVER DRIVE
BOCA RATON, FL 33428**

DO NOT WRITE IN THIS SPACE

**FILED
Apr 19, 2006 08:00 AM
Secretary of State**



04222006 NO CHG P CASE#191 (11/15)

4. FDD Number: 05-0291485	App. Classification <input type="checkbox"/> Political <input type="checkbox"/> Economic <input type="checkbox"/> Social
5. Contribution Amount & Purpose: \$8.75 Autopayplus From Registered	\$8.75 Autopayplus <input type="checkbox"/> From Registered

6. Name and Address of Current Registered Agent

**GUVNUP, ARMAND W
21681 FALL RIVER DRIVE
BOCA RATON, FL 33428**

**DO NOT WRITE
IN THIS SPACE**

7. This page must be signed if this is a statement for the purpose of changing its registered office or registered agent, or certifying the State of Florida, item 10, with respect to the entity's current registered agent.

SIGNATURE:

ARMAND W GUVNUP, BOCA RATON, FL 33428

ARMAND W GUVNUP, BOCA RATON, FL 33428

DATE:

**FILE NUMBER: FEE # \$15.00
After May 1, 2006 Fee will be \$25.00**

**8. Election/Campaign Financing
Trust Fund Contribution:**

**\$5.00 May Be
Applied To Fees**

10.

OFFICERS AND DIRECTORS:

**NAME
TITLE
ADDRESS
STATE/ZIP CODE
CITY/ST/ZIP**
ARMAND W GUVNUP, TARA
21681 FALL RIVER DRIVE
BOCA RATON, FL 33428

**NAME
TITLE
ADDRESS
STATE/ZIP CODE
CITY/ST/ZIP**
ARMAND W GUVNUP, ARMAND W
21681 FALL RIVER DRIVE
BOCA RATON, FL 33428

**NAME
TITLE
ADDRESS
STATE/ZIP CODE
CITY/ST/ZIP**

**U00000519983
05/02/06-80076-007 150.00**

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IN THIS SPACE**

11. I hereby certify that the information supplied in this document is true to the best of my knowledge and belief. The signatures contained in Chapter 109, Florida Statutes, which certify that the information contained in this document is true to the best of my knowledge and belief, and correctly identify the signature(s) shown have the signer's legal effect(s). (Note(s): Under Florida law, shall mean evidence in writing of the communication of the facts set forth in the document to the person to whom it is addressed. This report is submitted by Chapter 109, Florida Statutes, and that my name appears in block letters above and is changed or altered in any manner, it will not be considered valid.)

SIGNATURE:

ARMAND W GUVNUP, REGISTERED AGENT

4/17/06

**RECEIVED
FLORIDA DEPARTMENT OF STATE
APR 19 2006**