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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P 9900036364

1. Corporation Name

TANGLES OF STUART CORP.

Principal Place of Business

Mailing Address

00 OCT 16 PM 2: 05

32 B- SE OSCEOLA ST. STUART, FL 34994						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
2. Principal Place of Business 2a. Mailing Address 1 SAME 28 SAME					· · · · · · · · · · · · · · · · · · ·	4/19/1999 4. FEI Number Applied For Not Applied For					
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired					
City & State City & State			9	·		6. Election Campaign Financing Trust Fund Contribution \$5.00 May 8e Added to Fees	•				
Zip	Country	Zip 29	30	ntry	,	8. This corporation owes the current year intangible Personal Property Tax.					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
HOLCOMB, KAREN 32B-SE OSCEDLA ST. STUART, FL 34994				81 82	Name Street Addre	ess (P.O. Box Number is Not Acceptable)					
				83	0.1						
				63	,						
					City	FL 85 Zip Code					
11. Pursuant to	the provisions of Sections 607	.0502 and 607.1508, Flor	rida Statutes, the al	pove	-named corpo	oration submits this statement for the purpose of changing its registered	<u>; </u>				

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.

12. OFFICERS AND DIRECTORS TITLE PRESIDENT DELETE 11TITLE Change Additions/Changes to OFFICERS AND DIRECTORS IN 12 12 12 12 12 12 13 13	SIGNATURE		backtoned A and slove the	required when reinstating) DATE		-			
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Ify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an id to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

MANATURE AND TYPED OR PRINTED NAME OF SIGHING OFFICER OR GIRECTOR

TANGLES OF STUART CORPORATION 32-B SE OSCEOLA STREET STUART FL 34994

September 29, 2000

Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee FL 32302-1500

Gentlemen,

I have just picked up my annual tax returns from my accountant and was notified by him that I had not renewed my annual report for my corporation. This was my first year of incorporation and I had no knowledge of the annual filing. Also the address listed for my business was not correct because in between the time I incorporated and the time I started my business I changed my location and in error never thought to notify your department of the change. Your records should reflect the forms being sent back to your office.

I enclose a check in the amount of \$ 150.00 and ask that you please waive the late fee given these circumstances.

Thanking you in advance,

Karen Holcomb – President

Tangles-of-Stuart Corporation-