## 2005 FOR PROFIT CORPORATION

of the corporation or the receiver or trustee empowered changed, or on an attachment with an address, with a

SIGNATURE:

## FILED ANNUAL REPORT Apr 23, 2005 08:00 AM Secretary of State **DOCUMENT # P99000109539** 1. Entity Name TAB PROPERTIES, INC. Principal Place of Business Mailing Address 2900 UNIVERSITY DR. 2900 UNIVERSITY DR. CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0970522 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAHAEL, GEORGE DO NOT WRITE 2900 UNIVERSITY DR. CORAL SPRINGS, FL 33065 IN THIS SPACE 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if emplicable (NOTE: Registered Agent signature required when reinstating) DATE Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME RAHAEL, GEORGE STREET ADDRESS 2900 UNIVERSITY DRIVE CITY-ST-ZIP CORAL SPRINGS, FL 33065 TITLE NAME LADD, CHARLES STREET ADDRESS 2822 UNVERSITT DRIVE CORAL SPRINGS, FL 33065 CITY-ST-ZIP $f = f_{1} \cdot f_{2} \cdot f_{3} \cdot$ VS TITLE NAME RAHAEL, PAULINE STREET ADDRESS 2900 UNIVERSITY DRIVE DO NOT WRITE CITY - ST - ZIP CORAL SPRINGS, FL 33065 IN THIS SPACE TITLE RAHAEL, GISELE NAME STREET ADDRESS 2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 the receiver this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ar like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Rahael,

President 4/15/05 954-753-9500