2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # S08437

1. Entity Name
TAFFETA, INC.

Principal Place of Business

4260 GULF SHORE BLVD. NORTH
THE VILLAGE ON VENETIAN BAY

ANNUAL REPORT

Mailing Address

4260 GULF SHORE BLVD. NORTH
THE VILLAGE ON VENETIAN BAY

FILED Jul 18, 2005 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

NAPLES, FL 34103

4. FEI Number Applied For 65-0221349 Not Applied be

5. Certificate of Status Desired

07152005

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

CARTER, JAMES 4260 GULF SHORE BLVD. NO. THE VILLAGE ON VENETIAN BAY NAPLES, FL 34103

NAPLES, FL 34103

## DO NOT WRITE IN THIS SPACE

No Chg-P

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 this if applicable. (NOTE Registered Agent signature required when reinstating)  Date  Date					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		Election Campaign Financing     Trust Fund Contribution.	, <sub>□</sub>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
ITLE	OFFICERS AND DIRECT	CTORS	<i>-</i>		The second secon
NAME STREET ADDRESS CITY-ST-ZIP	CARTER, JAMES 4260 GULF SHORE BLVD. N. NAPLES, FL 34103				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARTER, JAMES 4260 GULF SHORE BLVD. N. NAPLES, FL 34103		-		U00000373284 07/16/05-80009-013 150,00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing 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 to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if					