

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
Aug 12 1996 8:00 am
Secretary of State

DOCUMENT # **S71622** (2)
 1. Corporation Name

TARCO RECOVERY, INC.



Principal Place of Business Mailing Address
151 W 5TH ST SUITE 1-A HIALEAH FL 33010 **151 W 5TH ST SUITE 1-A HIALEAH FL 33010**

3. Date Incorporated or Qualified **08/05/1991** 3a. Date of Last Report **03/28/1995**

2. Principal Place of Business 2a. Mailing Address
21 2780 NW 38TH STREET **26 P. O. BOX 661158**

4. FEI Number **65-0279521** Applied For Not Applicable

Suite, Apt #, etc. Suite, Apt #, etc.

5. Certificate of Status Desired **\$8.75** Additional Fee Required

22 City & State 27 City & State
23 MIAMI, FL **28 MIAMI SPRINGS, FL**

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

24 Zip 25 Country 29 Zip 30 Country
33142 USA **33266 USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

OOTEN, CARLOS
7070 W 2ND LANE
HIALEAH FL 33014

10. Name and Address of New Registered Agent

81 Name **BRUCE SCHWARTZ, ESQ**
 82 Street Address (P.O. Box Number is Not Acceptable) **8360 W. OAKLAND PARK BLVD**
 83 **SUITE #317**
 84 City **SURPRISE** FL 85 Zip Code **33351**

11. Pursuant to the provisions of Sections 607.0402 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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.

SIGNATURE *Bruce Schwartz* (NOTE: Registered Agent signature required when resigning.)

8/2/96

12. OFFICERS AND DIRECTORS		DELETE
TITLE	PS	<input checked="" type="checkbox"/>
NAME	OOTEN, CARLOS	
STREET ADDRESS	7070 W. 2ND LANE	
CITY-ST-ZIP	HIALEAH FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	VT	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	COGBURN, VICTORIA E.		
1.3 STREET ADDRESS	501 LAVILLA DRIVE		
1.4 CITY-ST-ZIP	MIAMI SPRINGS, FL 33166		
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Victoria E. Cogburn* **8/2/96** (305) 638-7376
 VICTORIA E. COGBURN, VICE PRESIDENT/TREASURER

CR2E034 (3/96)