FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

FILED
1995 JUL 26 AM 10:18
TALLAHASSEE, FLORIDA

DOCUMENT # S78813 (0)

1. Corporation Name
TAJ CAPITAL MANAGEMENT, INC.

Principal Place of Business	Mailing Address
2502 N. ROCKY POINT DR. STE. 745 TAMPA FL 33607	2502 N. ROCKY POINT DR. STE. 745 TAMPA FL 33607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/06/1991
3a. Date of Last Report: 09/15/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 59-3084008 ☐ Applied For ☐ Not Applicable
Suite, Apt #, etc (22) (27)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State (23) (28)
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip (24) Country (25) Zip (29) Country (30)
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~TOMLINSON, A~~
~~607 C W. M.L. KING BLVD.~~
~~SUITE 101~~
~~TAMPA FL 33607~~

10. Name and Address of New Registered Agent

01 Name: Wilber Jurdine
02 Street Address (P.O. Box Numbers Not Acceptable): ~~2701 N. Rocky Point Dr~~
03: 2502 N. Rocky Point Dr. Ste. 745
04 City: Tampa FL 05 Zip Code: 33607

11. Pursuant to the provisions of Sections 607.0502 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: [signature] DATE: 5/25/95
(Signature typed or printed name of registered agent and the date signed) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	11 TITLE	CEO ☒ Change ☐ Addition
NAME	JUNDINE, WILBER	12 NAME	JURDINE, WILBER
STREET ADDRESS	2701 N. ROCKY POINT DR. #915	13 STREET ADDRESS	2502 N Rocky Point Dr., # 745
CITY-ST-ZIP	TAMPA FL 33607	14 CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	~~KORI, G. M.~~	22 NAME	
STREET ADDRESS	~~7137 PELICAN ISLAND DR.~~	23 STREET ADDRESS	
CITY-ST-ZIP	~~TAMPA FL 33634~~	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	~~WATSON, PATRICK S~~	32 NAME	
STREET ADDRESS	~~607C W. M.L. KING BLVD. #201~~	33 STREET ADDRESS	
CITY-ST-ZIP	~~TAMPA FL 33603~~	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 5/2/95 Date 382-1233 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0202050 CP