

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90281 007 ***150.00

DOCUMENT # S87167

1. Entity Name

TABROS CORPORATION



Principal Place of Business

13151 NEWBERRY RD
TIOGA FL 32669
US

Mailing Address

P.O. BOX 13461
GAINESVILLE FL 32604
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3096098

Applied For
Not Applicable

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



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIAZ, MIGUEL J.
13151 NEWBERRY RD
TIOGA FL 32699

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **V** ☐ Delete
NAME DIAZ, MIGUEL J.
STREET ADDRESS 13151 NEWBERRY RD
CITY-ST-ZIP TIOGA FL 32669

TITLE **S** ☐ Change ☒ Addition
NAME **Diaz, Anna Lissa**
STREET ADDRESS **13151 Newberry Rd**
CITY-ST-ZIP **Tioiga FL 32669**

TITLE **P** ☐ Delete
NAME TABOADA, MANUEL
STREET ADDRESS 13151 NEWBERRY RD
CITY-ST-ZIP TIOGA FL 32669

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME TABOADA, CONCEPCION
STREET ADDRESS 13151 NEWBERRY RD
CITY-ST-ZIP TIOGA FL 32669

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME TABOADA, JAVIER
STREET ADDRESS 13151 NEWBERRY RD
CITY-ST-ZIP TIOGA FL 32669

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME TABOADA, MIGUEL
STREET ADDRESS 13151 NEWBERRY RD
CITY-ST-ZIP TIOGA FL 32669

TITLE **V** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME DIAZ, LUIS A
STREET ADDRESS 13151 NEWBERRY RD
CITY-ST-ZIP NEWBERRY FL 32669

TITLE **V** ☒ Change ☐ Addition
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature] Luis A. Diaz 4/26/04 352 331 4000