

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.0

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STA
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 19 1996 8:00 am
Secretary of State

DOCUMENT # V30081
1. Corporation Name
TARCA, INC.

(6)



Principal Place of Business

3754 NW 54 ST.
MIAMI FL 33142
US

Mailing Address

3754 NW 54 ST.
MIAMI FL 33142
US

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
04/21/1992

3a. Date of Last Report
03/20/1995

4. FEI Number
65-0328398

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

ALLEN, R. KEITH
9205 N.W. 101ST ST.
MEDLEY FL 33178

10. Name and Address of New Registered Agent

81 Name
RODRIGUEZ, JUAN E.
82 Street Address (P.O. Box Number is Not Acceptable)
80 S.W. 8th STREET, STE. 2550
83
84 City
MIAMI

FL 85 Zip Code
33130

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]

2-29-96

12. OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reappointing)

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

TITLE	PD	NAME	QUEVEDO, ELOY	STREET ADDRESS	10111 S.W. 142ND STREET	CITY-ST-ZIP	MIAMI FL	☐ DELETE
TITLE	STD	NAME	QUEVEDO, MARIA	STREET ADDRESS	10111 S.W. 142ND STREET	CITY-ST-ZIP	MIAMI FL	☐ DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ DELETE

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.1 TITLE	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 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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
(MARIA QUEVEDO)

3/15/96 (301) 635-1010

CR2E034 (12/95)