

DOCUMENT # V44780

(7)

1. Corporation Name  
**TARGET, INC.**

95 APR 19 AM 2:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**2781 S. OAKLAND FOREST DRIVE #101  
OAKLAND PARK FL 33308**

Mailing Address  
**2781 S. OAKLAND FOREST DRIVE #101  
OAKLAND PARK FL 33308**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified : **06/19/1992**      3a. Date of Last Report : **04/28/1994**

2. Principal Place of Business  
21. Suite, Apt. #, etc.

2a. Mailing Address  
26. Suite, Apt. #, etc.

4. FEI Number : **65-0342727**      Applied For :  Not Applicable

22. City & State

27. City & State

5. Certificate of Status Desired       **\$0.75 Additional Fee Required**

23. Zip      Country

28. Zip      Country

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

24. Zip      Country

29. Zip      Country

8. This corporation has liability for intangible tax under S. 189.032 Florida Statutes       Yes       No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MELLO, RAYMOND  
2781 S. OAKLAND FOREST DRIVE #101  
OAKLAND PARK FL 33308**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City      **FL**      85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **PT**  
NAME: **MELLO, RAYMOND**  
STREET ADDRESS: **2781 S OAKLAND FOREST DR #101**  
CITY-ST-ZIP: **OAKLAND PARK FL**

1.1 TITLE       Change       Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE       Change       Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE       Change       Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE       Change       Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE       Change       Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE       Change       Addition  
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 110.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Raymond Mello*      **RAYMOND MELLO**      **4/14/95**      **(305)458-1643**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      DATE      Anytime 1 Year 8