

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051311

FILED
Apr 15, 2009
Secretary of State

Entity Name: TERNION INVESTMENT GROUP, INC.

Current Principal Place of Business:

C/O BEST TIME, INC.
55 E 1ST STREET, SUITE 8
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

C/O BEST TIME, INC.
55 E 1ST STREET, SUITE 8
MIAMI, FL 33132

New Mailing Address:

FEI Number: 76-0753774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, VICTOR V
16308 NW 11 ST
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOLEDO, ELVIS
Address: 55 NE 1ST STREET
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: TOLEDO, CARMEN
Address: 55 NE 1 ST STREET
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: MARRERO, VICTOR V
Address: 16308 NW 11 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: MARRERO, IRIS
Address: 16308 NW 11 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: MONTANO, JOSE F
Address: 315 SW 185 AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: MONTANO, LOURDES
Address: 315 SW 185 AVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELVIS TOLEDO

D

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date