

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000802

**Entity Name:** TNT MISFITS, INC.

**Current Principal Place of Business:**

9431 NW 3RD STREET  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

9431 NW 3RD STREET  
PEMBROKE PINES, FL 33024

**FEI Number:** 25-1910148

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BAIN, TIFFANY NPD  
9431 NW 3RD STREET  
PEMBROKE PINES, FL 33024 US

**FILED**  
**May 23, 2013**  
**Secretary of State**  
**CC7549671790**

*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

**Officer/Director Detail :**

Title PD  
Name BAIN, TIFFANY PD  
Address 9431 NW 3RD STREET  
City-State-Zip: PEMBROKE PINES FL 33024

Title VD  
Name DEW, TIEESHA VD  
Address 21375 NW 9TH COURT APT 201  
City-State-Zip: MIAMI FL 33169

Title VD  
Name ROBERTS, LATOYA VD  
Address 9431 NW 3RD STREET  
City-State-Zip: PEMBROKE PINES FL 33024

Title TD  
Name BAIN, TIFFANY  
Address 9431 NW 3RD STREET  
City-State-Zip: PEMBROKE PINES FL 33024

Title SD  
Name BAIN, OMAR SD  
Address 9431 NW 3RD STREET  
City-State-Zip: PEMBROKE PINES FL 33024

Title SD  
Name ROBERTS, DESIREE SD  
Address 21375 NW 9TH COURT APT 201  
City-State-Zip: MIAMI FL 33169

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIFFANY BAIN

**PD**

**05/23/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date