

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001555

Entity Name: TECOTA SERVICES CORP.

FILED
Mar 21, 2007
Secretary of State

Current Principal Place of Business:

2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR
COCONUT GROVE, FL 33133

New Principal Place of Business:

2601 SOUTH BAYSHORE DRIVE
SUITE 900
COCONUT GROVE, FL 33133

Current Mailing Address:

2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR
COCONUT GROVE, FL 33133

New Mailing Address:

2601 SOUTH BAYSHORE DRIVE
SUITE 900
COCONUT GROVE, FL 33133

FEI Number: 52-2220127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD
#221E
PALM BEACH GARDENS, FL 33410 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: PD () Delete
Name: MEDINA, MANUAL D
Address: 2601 S BAYSHORE DRIVE 9TH FLOOR
City-St-Zip: MIAMI, FL 33133

Title: VSD () Delete
Name: SEGRERA, JOSE
Address: 2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR
City-St-Zip: COCONUT GROVE, FL 33133

Title: SP () Delete
Name: WATTS, FERN
Address: 2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MEDINA, MANUEL D.
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 900
City-St-Zip: MIAMI, FL 33133

Title: DVP (X) Change () Addition
Name: SEGRERA, JOSE A.
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 900
City-St-Zip: COCONUT GROVE, FL 33133

Title: S (X) Change () Addition
Name: SMITH, ADAM T.
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 900
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM T. SMITH

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03/21/2007

Electronic Signature of Signing Officer or Director

Date