


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2005 08:00 AM
Secretary of State

DOCUMENT # F01000004466
1. Entity Name
TOURNEAU TIME MACHINE, INC.



Principal Place of Business: 3 EAST 54TH STREET, NEW YORK, NY 10022
Mailing Address: 3 EAST 54TH STREET, NEW YORK, NY 10022

DO NOT WRITE IN THIS SPACE



08092005 No Chg-P CR2E034 (10/03)
4. FEI Number: 13-3946003 Applied For: Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WEXLER, ROBERT J
STREET ADDRESS	3 EAST 54TH STREET
CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	V
NAME	PAOLICELLI, JOHN
STREET ADDRESS	3 EAST 54TH STREET
CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	STD
NAME	WEXLER, DAVID
STREET ADDRESS	3 EAST 54TH STREET
CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	D
NAME	FRISHWASSER, DANIEL
STREET ADDRESS	3 EAST 54TH STREET
CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert Wexler Date: 8/12/05 Daytime Phone #: 212 758 6022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR