
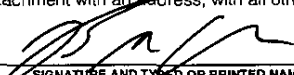


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000002157 1. Entity Name TMNI INTERNATIONAL INCORPORATED						<div style="transform: rotate(-15deg);"> FILED 04 APR 13 AM 9:21 SECRETARY OF STATE TALLAHASSEE, FLORIDA </div>	
Principal Place of Business 11900 BISCAYNE BLVD., 4TH FLOOR MIAMI, FL 33181				Mailing Address 11900 BISCAYNE BLVD., 4TH FLOOR MIAMI, FL 33181			
2. Principal Place of Business 2 N. RIVERSIDE PLAZA				3. Mailing Address 2 N. RIVERSIDE PLAZA			
Suite, Apt. #, etc. #950				Suite, Apt. #, etc. #950			
City & State CHICAGO, IL				City & State CHICAGO, IL			
Zip 60606		Country U.S.A.		Zip 60606		Country U.S.A.	
4. FEI Number 65-0425859				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WIEDEMANN, GEORGE 11900 BISCAYNE BLVD., 4TH FLOOR MIAMI, FL 33181 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D WEIDEMANN, GEORGE S. 2 N. RIVERSIDE PLAZA #950 CHICAGO, IL 60606 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LERCH, STEPHEN E 11900 BISCAYNE BLVD., 4TH FLOOR MIAMI, FL 33181 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S/D ADEL, BRYAN R. 2 N. RIVERSIDE PLAZA #950 CHICAGO, IL 60606 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BORGES, GREGORY R 11900 BISCAYNE BLVD., 4TH FLOOR MIAMI, FL 33181 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D POSNER, KENNETH R. 2 N. RIVERSIDE PLAZA #950 CHICAGO, IL 60606 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 				(BRYAN R. ADEL)			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date 4-8-04 Daytime Phone # 312-521-6767			