

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000332

Entity Name: TTI OF MIAMI, INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

C/O JADE ASSOCIATES III  
BRICKELL AVE, 11TH FLOOR  
MIAMI, FL 33131

## Current Mailing Address:

C/O JADE ASSOCIATES III  
BRICKELL AVE, 11TH FLOOR  
MIAMI, FL 33131

## New Principal Place of Business:

100 NORTH BISCAYNE BOULEVARD  
SUITE 801  
MIAMI, FL 33132

## New Mailing Address:

100 NORTH BISCAYNE BOULEVARD  
SUITE 801  
MIAMI, FL 33132

FEI Number: 58-2509380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: CP ( ) Delete  
Name: GIRAUD, STEPHANIE  
Address: 1330 WEST AVE #3101  
City-St-Zip: SOUTH BEACH, FL 33139

Title: VP (X) Delete  
Name: TURK, KANAN C  
Address: 135TH WEST 20TH ST #304  
City-St-Zip: NEW YORK, NY 10011

Title: S ( ) Delete  
Name: PIRES, ISABELLE  
Address: 135TH WEST 20TH ST #304  
City-St-Zip: NEW YORK, NY 10011

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: PIRES, ISABELLE  
Address: 49 WEST 72ND STREET -15B-  
City-St-Zip: NEW YORK, NY 10023

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEPHANE GIRAUD

P

04/28/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date