

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005340

Entity Name: C.C.T.I, INC.

FILED
Apr 15, 2011
Secretary of State

Current Principal Place of Business:

12518 W. ATLANTIC BLVD
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

12518 W. ATLANTIC BLVD
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 26-1079442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGUE, DOUGLAS
12518 W. ATLANTIC BLVD
CORAL SPRINGS, FL 33071 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

OFFICERS AND DIRECTORS:

Title: DS
Name: SHAPIRO, MITCHELL
Address: 295 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: PCEO
Name: EVES, ROBIN
Address: 295 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: DT
Name: EVES, ROBIN
Address: 295 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: SMD
Name: HAGUE, DOUGLAS
Address: 12518 WEST ATLANTIC BOULEVARD
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D
Name: JENNINGS, EDWARD
Address: 12518 WEST ATLANTIC BOULEVARD
City-St-Zip: CORAL SPRINGS, FL 33071

Title: COOD
Name: PONCE DE LEON, IGNACIO
Address: 295 MADISON AVENUE 12TH FLOOR
City-St-Zip: NEW YORK, NY 10017 US

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

SIGNATURE: DOUGLAS HAGUE

SMD

04/15/2011

Electronic Signature of Signing Officer or Director

Date