

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K17105

Entity Name: TC TECHNOLOGIES, INC.

FILED
Mar 14, 2008
Secretary of State

Current Principal Place of Business:

% ALFRED FINKELSTEIN
6401 GALLOWAY ROAD, 87TH AVENUE, S.W.
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

% ALFRED FINKELSTEIN
6401 GALLOWAY ROAD, 87TH AVENUE, S.W.
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-0039202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINKELSTEIN, ALFRED
6401 GALLOWAY ROAD
87TH AVENUE, S.W.
MIAMI, FL 33173 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: D () Delete
Name: MYERS, RONALD B.,
Address: 118 WEST DEWEY AVE.
City-St-Zip: WHARTON, NJ 07885

Title: D () Delete
Name: MYERS, LANCE D.,
Address: 200 E. END AVE., 2L
City-St-Zip: NEW YORK, NY

Title: D () Delete
Name: KAHN, LAURENCE H.,
Address: 8 BELL ST., APT. 6
City-St-Zip: MONTCLAIR, NJ 07042

Title: D () Delete
Name: BROWN, RICHARD A,
Address: 929 ALAMEDA WAY
City-St-Zip: SARASOTA, FL 34234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LAURENCE KAHN

PRES

03/14/2008

Electronic Signature of Signing Officer or Director

_____ Date