

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009492

FILED
Feb 12, 2009
Secretary of State

Entity Name: TBY, INC.

Current Principal Place of Business:

5151 NE 14TH TERRACE
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

5151 NE 14TH TERRACE
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 01-0763168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHN, ARTHUR
3670 INVERRARY DRIVE
LAUDERHILL, FL 33319 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: D () Delete
Name: MOMBACH, GEOFFREY
Address: 21 COMPASS LANE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: KAHN, ARTHUR
Address: 3670 INVERRARY DR
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: SOLOMON, HARRIS
Address: 2665 NE 26 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33306

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:

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

SIGNATURE: ARTHUR KAHN

D

02/12/2009

Electronic Signature of Signing Officer or Director

Date