

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000399

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TREEMENDOUS MIAMI, INC.

## Current Principal Place of Business:

18450 SW 212 ST  
MIAMI, FL 33187

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 343224  
FLORIDA CITY, FL 33034

## New Mailing Address:

FEI Number: 65-0897926

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, ROBERT  
HOLLAND & KNIGHT  
701 BRICKELL AVE STE 3000  
MIAMI, FL 33131 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: PD ( ) Delete  
Name: SHANE, KAREN  
Address: 4375 SW 13ST  
City-St-Zip: MIAMI, FL 33134

Title: VD ( ) Delete  
Name: HUNT, GARY  
Address: 3447 SHERIDAN AVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD ( ) Delete  
Name: SMITH, ROBERT  
Address: 7643 SW 71TH AVE  
City-St-Zip: MIAMI, FL 33143

Title: SD ( ) Delete  
Name: PEARSON, STEVE  
Address: 13444 SW 83 AVE  
City-St-Zip: PINECREST, FL 33156

Title: D ( ) Delete  
Name: SCINTO, LEN  
Address: 3091 BIRD AVE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: BECKHAM, GAIL  
Address: 3138 CENTER ST  
City-St-Zip: COCONUT GROVE, FL 33133

## 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: D (X) Change ( ) Addition  
Name: PEARSON, STEVE  
Address: 13444 SW 83 AVE  
City-St-Zip: PINECREST, FL 33156

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

Title: SD (X) Change ( ) Addition  
Name: TALBOTT, LINDA  
Address: 1580 HAMMOND DR.  
City-St-Zip: MIAMI SPRINGS, FL 33166

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: KAREN SHANE

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date