. 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2006 08:00 AM Secretary of State

			· · · · · · · · · · · · · · · · · · ·	-	Secrei	tary of State
1. Entity Name	DOCUMENT # P00000007083 1. Entity Name TJ LOVE, INC.				Secre	
Principal Place 5525 SOUTH MARGATE, FL	WEST 7TH STREET 5	alling Address 525 SOUTHWEST 7TH STREE MARGATE, FL 33068	τ			(1) MERSON REN (1) SEREN MENTEN SEREN (1) SEREN (1) SEREN
DO NOT WRITE IN THIS SPA			CE	01302008 4. FEI Numbe 65-097	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
	6. Name and Address of Current Regis	tered Agent				
LOVE, TERRY 5525 SW 7 STREET MARGATE, FL 33068			DO NOT WRITE IN THIS SPACE			
8. 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. I am familiar with, and accept the obligations of registered agent.						
Signature, typed or printed name of registered agent and title if explicable [NOTE, Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				.00 May Be ded to Fees		
10.	OFFICERS AND DIRE	CTORS	-			
TITLE NAME SIRELI ADDRESS CATY-ST-119	PSTD LOVE, TERRY 5525 SOUTHWEST 7TH STREET MARGATE, FL 33068					
TITLE NAME SIREET ADDRESS CITY-ST-ZIP					י אל אל אל אני איני מור אל אל אני איני	458027
TATLE NAME					1137 (7706	80028-014 150.00
STREET ADDRESS				DΩ	NOT W	IDITE
CITY-ST-ZIP					NOT W	
NAME	{		1	IN	THIS SI	PACE
STREET ADDRESS						
CITY-ST-ZIP			-{			
NAME						
STREET ADDRESS			1			
City-St-ZiP						
TITLE NAME	}					
STREET ADDRESS	1		1			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TIPED OR PROVIDED NAME OF SIGNING OFFICER OR DIRECTOR

Date Cartin

saytme Phone 6