2005 FOR PROFIT CORPORATION

ANNUAL REPORT Apr 07, 2005 08:00 AM Secretary of State DOCUMENT # P00000048415 TJM PROPERTIES, INC. Principal Place of Business Mailing Address 225 3RD ST N 225 3RD ST N ST PETERSBURG, FL 33701 ST_PETERSBURG, FL 33701 04042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3680368 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCCARTHY, TERENCE J DO NOT WRITE 225 3RD ST N ST PETERSBURG, FL 33701 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 applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 H00000292242 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 ∩4/N7/05-80060-015 150.00 OFFICERS AND DIRECTORS 10. TITLE NAME MCCARTNY, TERENCE J 225 3RD ST W STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL. 33701 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #