2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089763

FILED Mar 31, 2008 Secretary of State

Entity Name: TOTAL INTERNATIONAL CAREER CENTER INC.

Current P	rincipal Plac	e of Business:	New Principal F	Place of Business:
3060 W 12 HIALEAH,	2 AVE. FL 33012			
Current M	lailing Addre	ess:	New Mailing Ac	ldress:
3060 W 12 HIALEAH,	2 AVE. FL 33012			
El Number	: 65-1065271	FEI Number Applied For ()	FEI Number Not Applicable	() Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Addr	ess of New Registered Agent:
3060 W 12 HIALEAH,		US		
	e named entity		purpose of changing its reg	istered office or registered agent, or bo
n the Stat	e named entity e of Florida.		purpose of changing its reg	istered office or registered agent, or bo
	e named entity e of Florida. RE:	submits this statement for the		
n the Stat	e named entity e of Florida. RE:			istered office or registered agent, or bo Date
n the Stat	e named entity e of Florida. RE:Electro	submits this statement for the		
n the State	e named entity e of Florida. RE:Electro	submits this statement for the onic Signature of Registered Agang Trust Fund Contribution ().	gent	
n the Stati BIGNATU Election Cal DFFICER Title: lame: ddress:	e named entity e of Florida. RE: Electro mpaign Financii S AND DIREC PD (TORRECILLA	r submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete , JULIO E TH ST., 2ND FLOOR	gent	Date
n the State	e named entity e of Florida. RE: Electro mpaign Financii S AND DIREC PD (TORRECILLA 590 EAST 491 HIALEAH, FL	r submits this statement for the conic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete , JULIO E TH ST., 2ND FLOOR 33013) Delete HOPE //E.	ADDITIONS/CH Title: Name: Address: City-St-Zip: Title: Name: TORF Address: 3060	Date ANGES TO OFFICERS AND DIRECT

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: JULIO E TORRECILLA PRES 03/31/2008