

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000011017

1. Entity Name

TWIN TEE PROPERTIES, INC.

Principal Place of Business

2382 W 77 ST
HIALEAH FL 33016

Mailing Address

1025 SAN PEDRO AVE
MIAMI FL 33156

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1074912

Applied For

Not Applicable

5. Certificate of Status Desired

1st MOORE

CR2E034 (10/05)

5. Certificate of Status Desired

8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OSMAN, L MICHAEL ESQ
1474-A WEST 84 STREET
HIALEAH FL 33014

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 agree to, the obligations of registered agent.

SIGNATURE

FRANK L. FORTUNE V. PRES

2-20-06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution

5.00 May Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

DP

NAME

VERGA, JOSEPH

STREET ADDRESS

16207 ERIE PLACE

CITY-ST-ZIP

FORT LAUDERDALE FL 33331

TITLE

DS

NAME

WILK, EDWARD DONALD

STREET ADDRESS

10940 SW 115 ST

CITY-ST-ZIP

MIAMI FL 33176

TITLE

DV

NAME

FORTUNE, FRANCIS L

STREET ADDRESS

1025 SAN PEDRO AVE

CITY-ST-ZIP

CORAL GABLES FL 33156

TITLE

D

NAME

VERGA, MICHAEL J

STREET ADDRESS

9511 NW 93 ST

CITY-ST-ZIP

PEMBROKE PINES FL 33024

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 filing does not qualify for the exemptions contained in Section 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

FRANK L. FORTUNE V. PRES

2-20-06/305-592-622