

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000018961

FILED
Mar 06, 2008
Secretary of State

Entity Name: TECHNOLOGY DEVELOPMENT COMMUNICATION, INC.

Current Principal Place of Business:

2620 SW 27TH AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

601 BRICKELL KEY DRIVE
SUITE 705
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1081647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DE LA PENA & ASSOCIATES, P.A.
601 BRICKELL KEY DRIVE
SUITE 705
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OLLOQUI, RICARDO
Address: 2620 SW 27TH AVENUE
City-St-Zip: MIAMI, FL 33133

Title: CEOD () Delete
Name: OLLOQUI, RAFAEL
Address: 2620 SW 27TH AVENUE
City-St-Zip: MIAMI, FL 33133

Title: DT () Delete
Name: PROANO, ANDRES
Address: 2620 SW 27TH AVENUE
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: DE LA PENA, LEONCIO E
Address: 601 BRICKELL KEY DRIVE SUITE 705
City-St-Zip: MIAMI, FL 33131

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

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: LEONCIO DE LA PENA

SD

03/06/2008

Electronic Signature of Signing Officer or Director

_____ Date