2004 FOR PROFIT CORPORATION

Sep 17, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P01000110086** 09-17-2004 90001 003 ***150.00 T.S.M. INVESTMENTS, INC. Mailing Address Principal Place of Business C/O MICHAEL LEVENBERG C/O MICHAEL LEVENBERG 54073045 6512 HOLLYWOOD BLVD. 6512 HOLLYWOOD BLVD. HOLLYWOOD, FL 33024 HOLLYWOOD, FL 33024 , , , --, , 42F&2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08132004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 04-3593610 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SINGER, BERNARD A --Street Address (P.O. Box Number is Not Acceptable) 3107 STIRLING RD. SUITE 105 FORT LAUDERDALE, FL 33312 City 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 accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. IIILE TITLE ☐ Delete Change | ☐ Addition NAME SULLIVAN, THERESA MARIE NAME 6512 HOLLYWOOD BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33024 CITY-ST-ZIP D TITLE Delete TILE ☐ Change ☐ Addition WHEELDON, TERRY E NAME NAME STREET ADDRESS 6512 HOLLYWOOD BLVD. STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33024 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CTY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY E WHEELDON SEPT 7/04 7/6831 9944

TO WHOM IT MAY LOWLERN 54073049

SORRY FOR THE DELAY I NEVER RECIEVED THE ORIGINAL ANNUAL. REPORT FOR 2004.

YOORS TRULY

TERRY E WIEELPON