

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095653

Entity Name: TC TECH, INC.

FILED  
Feb 10, 2004  
Secretary of State

## Current Principal Place of Business:

199 OCEAN LANE DRIVE STE 200  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

16300 NE 19 AVE.  
STE C  
NORTH MIAMI BEACH, FL 33162

## Current Mailing Address:

199 OCEAN LANE DRIVE STE 200  
KEY BISCAYNE, FL 33149

## New Mailing Address:

16300 NE 19 AVE.  
STE C  
NORTH MIAMI BEACH, FL 33162

FEI Number: 38-3658976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVA, FERNANDO  
16300 NE 19 AVE STE C  
NORTH MIAMI BEACH, FL 33162 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: TYKOCKI, MARCOS G  
Address: 199 OCEAN LANE DRIVE STE 200  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VD ( ) Delete  
Name: COPQUIN, RICARDO G  
Address: 199 OCEAN LANE DRIVE STE 200  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: TYKOCKI, MARCOS G  
Address: 16300 NE 19 AVE. STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARCOS TYOCKI

PD

02/10/2004

Electronic Signature of Signing Officer or Director

Date