2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098372

FILED Jul 09, 2007 Secretary of State

Entity Name: TBECK CAPITAL, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
5950 SW 1 MIAMI, FL	35TH TERRAC 33156	CE				
Current Mailing Address:			New Mailir	New Mailing Address:		
5950 SW 135TH TERRACE MIAMI, FL 33156			SUITE 106	230 NORTH PARK BLVD SUITE 106 GRAPEVINE, TX 76051		
FEI Number:	22-3871100	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
	RONALD G 35TH TERRAC 33156 US	DE				
The above in the State	named entity s of Florida.	ubmits this statement for the pu	rpose of changing it	s registered o	office or registered agent, or both,	
SIGNATUR						
	Electroni	c Signature of Registered Ager	nt	Date		
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice	э.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () WILLIAMS, RON 5950 SW 135TH MIAMI, FL 3315	TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () WILLIAMS, RON 5950 SW 135TH MIAMI, FL 3315	TERRACE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () WILLIAMS, BLA 14500 MARSH L ADDISON, TX 7	ANE	Title: Name: Address: City-St-Zip:	SD (X WILLIAMS, BL 5665 ARAPAH DALLAS, TX 7	IO #1632	
Title: Name:	VTD () WILLIAMS, TRA	Delete CIE	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: BLAKE WILLIAMS 07/09/2007 SD

5950 SW 135TH TERRACE

MIAMI, FL 33156

Address:

City-St-Zip: