2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054261

Name:

Address:

City-St-Zip:

AMEZQUITA, MARIO F MR

MIAMI, FL 33126

1200 NW 78TH AVENUE, SUITE 212

Entity Name: TEVECOL INTERNATIONAL NETWORK, CORP

FILED Jan 10, 2009 Secretary of State

Littly Nai	iie. TEVEC	OL INTERNATIONAL NETWOR	IN, CORF.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1200 NW 7 212 MIAMI, FL	'8TH AVEN 33126	UE			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1200 NW 78TH AVENUE 212					
MIAMI, FL	33126				
FEI Number:	77-0599579	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
AMEZQUITA, RICARDO MR 1200 NW 78TH AVENUE 212				AMEZQUITA, RICARDO CEO 1200 NW 78TH AVENUE 212	
MIAMI, FL 33126 US				MIAMI, FL 33126 US	
The above in the State		ty submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: RICARDO AMEZQUITA				01/10/2009	
	Elect	ronic Signature of Registered Age	ent	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		() Delete , RICARDO MR TH AVENUE, SUITE 212 3126	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:		() Delete , JOSE R MR TH AVENUE, SUITE 212 3126	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V/D	() Delete	Title:	() 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICARDO AMEZQUITA P 01/10/2009