## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000057150

Entity Name: TIMOTEO GROUP, INC.

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5055 COLLINS AVENUE 5055 COLLINS AVENUE

SUITE 7F SUITE 7B

MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33140 US

Current Mailing Address: New Mailing Address:

5055 COLLINS AVENUE 5055 COLLINS AVENUE

SUITE 7F SUITE 7B MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33140 US

FEI Number: 05-0570936 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FANELLI, GUILLERMINA
5055 COLLINS AVE
5011TE 7E

SUITE 7F SUITE 7B MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33140 US

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: 03/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title: FANELLI, GUILLERMINA FANELLI, GUILLERMINA Name: Name: 5055 COLLINS AVE SUITE 7F Address: 5055 COLLINS AVE SUITE 7B Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

Name: VITON, NESTOR Name: VITON, NESTOR

Address: 5055 COLLINS AVE SUITE 7F Address: 5055 COLLINS AVE SUITE 7B
City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140

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: GUILLERMINA FANELLI PD 03/19/2009