

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067272

Entity Name: T.B.M. FINANCIAL SERVICES, INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

865 NW 213 LN. BLDG 7 #102  
MIAMI, FL 33169

## New Principal Place of Business:

## Current Mailing Address:

865 NW 213 LN. BLDG 7 #102  
MIAMI, FL 33169

## New Mailing Address:

FEI Number: 59-0863960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCFARLAND, TASHANNA  
865 NW 213 LN. BLDG 7 #102  
MIAMI, FL 33169 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: DP ( ) Delete  
Name: MCFARLAND, TASHANNA  
Address: 865 NW 213 LN. BLDG 7 #102  
City-St-Zip: MIAMI, FL 33169

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T ( ) Change (X) Addition  
Name: MCFARLAND, TASHANNA  
Address: 865 NW 213TH LANE BLGD 7 #102  
City-St-Zip: MIAMI, FL 33169

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: TASHANNA MCFARLAND

P

04/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date