## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000084220

Entity Name: T.J. COUPLES INC

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place	New Principal Place of Business:	
1273 NW 1 <sup>-</sup> POMPANO	14 AVE BEACH, FL 33	8071	US			
Current Mailing Address:				New Mailing Addres	New Mailing Address:	
1273 NW 1 <sup>-</sup> POMPANO	14 AVE BEACH, FL 33	8071	US			
FEI Number:	55-0842015	FEI Nun	nber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1273 NW 1	RG, SONDRA M 14 AVE BEACH, FL 33		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:						
	Electronic	Signat	ure of Registered Agen	t	Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	P () D NEIDENBERG, SC 1273 NW 114 AVE CORAL SPRINGS	ONDRA E	171 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () D KRAFT, FRAN 7574 NW 70TH W PARKLAND, FL 3	/AY		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () D SONIN, MURIEL D 485 SPINNAKER WESTON, FL 333	)		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR () D NEIDENBERG, JA 1273 NW 114 AVE CORAL SPRINGS	\Y ≣	071 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () D KRAFT, WAYNE 7574 NW 70TH W PARKLAND, FL 3	/AY		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DIR () D SONIN, LARRY M 485 SPINNAKER WESTON, FL 333			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
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						

SIGNATURE: SONDRA M. NEIDENBERG P 01/05/2005

above, or on an attachment with an address, with all other like empowered.