2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000097604

Entity Name: TST DEVELOPMENT CORPORATION

FILED May 02, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1873 FOX CT WELLINGTON, FL 33414				1966 SW 94TH AVENUE MIRAMAR, FL 33025			
Current Mailing Address:				New Mailing Address:			
1873 FOX CT WELLINGTON, FL 33414 US				1966 SW 94TH AVENUE MIRAMAR, FL 33025 US			
FEI Number:	20-0208314	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Agent:	
SINGLETON-TAYLOR, SHONDA L 1873 FOX CT WELLINGTON, FL 33414 US				SINGLETON-TAYLOR, SHONDA L 1966 SW 94TH AVENUE MIRAMAR, FL 33025 US			
	named entity s e of Florida.	ubmits this statement for the p	urpose o	f changing i	ts registered o	ffice or registered agent, or	both,
SIGNATURE:				05/02/2005			
	Electroni	c Signature of Registered Age	ent			Date	
Election Car		(2)(b), F.S., the corporation did no Trust Fund Contribution(). 'ORS:	t receive t	-		TO OFFICERS AND DIRE	CTORS:
Title: Name: Address: City-St-Zip:	C/P () SINGLETON-TA' 1873 FOX CT WELLINGTON, F	•		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	. ,	Delete YLOR, SHONDA L FL 33414 US		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	SEC () SINGLETON, TH 1966 SW 94TH A MIRAMAR, FL 3	AVENUE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:		YLOR, AUTIER D AVENUE, APT#205		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () SINGLETON, WI 621 NW 10TH S HALLANDALE, F	TREET		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () SINGLETON, LE 1310 SOUTH 29 HOLLYWOOD, F	TH AVENUE		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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHONDA SINGLETON-TAYLOR OFFI 05/02/2005