

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State

04-22-2005 90271 045 ****50.00
05-25-2005 90002 015 ***100.00

66026903

DOCUMENT # P04000011941			
1. Entity Name TF HOLDINGS CORPORATION			
Principal Place of Business 1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131		Mailing Address 1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131	
2. Principal Place of Business 801 Brickell Ave Suite, Apt. #, etc. SUITE 2380 City & State Miami, Florida Zip 33131		3. Mailing Address 801 Brickell Ave Suite, Apt. #, etc. SUITE 2380 City & State Miami, Florida Zip 33131	
4. FEI Number 58-2681962		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent SANCHEZ-ABALLI, RAFAEL ESQ. 1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131	
7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ APRIL 2005 Signature, address, printed name of registered agent and state if applicable (NOTE: Registered Agents signature required when remaining) DATE	
FILE NOW!!! FEE IS \$160.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP C BERTONI, JULIO 1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or in an attachment with an address, with all other like empowered.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

ATTACHMENT

06026903

T.F. HOLDING, CORP.

15433 NE 21st Avenue
North Miami Beach, FL 33162
Tel. (305)956-2828/Fax (305)956-9926

August 31st, 2005.

Florida Department of State
Division of Corporations
Ref.: P04000011941

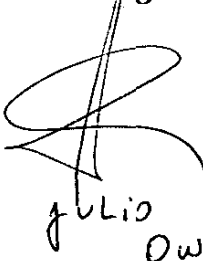
To whom it may concern:

As per my conversation with one of your service customer representatives, I am writing to you in order to let you know that we never received the reject letter you sent us back in May 2005 since you had an incorrect address for us.

On behalf of this, we are asking you to please waive the \$ 400.00 penalty fee.

Enclosed, please find a copy of the our annual report including the FEI number.

Best Regards.


JULIO A. BERTONI
OWNER