## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000011941

## **FILED** Mar 19, 2007 8:00 am Secretary of State 03-19-2007 90098 005 \*\*\*150.00

TF HOLDINGS CORPORATION								
Principal Plac	e of Business	Mailing Address				000H90		
801 BRICKEL		801 BRICKELL AVE			4	0038728		
SUITE 2380	E MVE	SUITE 2380			-	, -		
MIAMI, FL 3	3131	MIAMI, FL 33131					# 11/6/   {{11/10	<b>                                 </b>
1543	Nace of Business - No P.O. Box #		NE à	21 AVE				
Suite, Apt.		Suite, Apt. #, etc.			02252007	Chg-P	CR2E034 (12/06	i)
City & State  JORTH	KiAMI FOEACH, ML		MM	BEACH F	4. FEI Numi 58-26		<b>⊢</b>	Applied For Not Applicable
331	62 USA	33162	Count	ŠA		e of Status Desired	☐ <b>\$8.75</b> A Fee Requi	
	6. Name and Address of Current R	egistered Agent			7. Name an	d Address of New R	tegistered Agent	
CANCHEZ ABALLI DAFAEL FCO				TULIO BERTONI				
SANCHEZ-ABALLI, RAFAEL ESQ. 1401 BRICKELL AVENUE, SUITE 825				Street Address (P.O. Box Number is Not Acceptable)				
MIAMI, FL 33131				154	133 1	E 21	AVE	
				CityNor	TH Rimu	BEACH	- FL Zip Co	20162
8. The above	named entity submits this statement for ions of registered agent.	the purpose of changing i	its registere	d office or regi	stered agent, or b	oth, in the State of Flo	orida. I am familiar wit	h, and accept
inc obligat	ions or registrated agent.							
SIGNATURE	Signature, types a printed name of registered agent an	d title if applicable. (Ni	OTE: Registered	Agent signature req	uired when reinstating)		DATE *	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Camp Trust Fund Co	-		\$5.00 May Be Added to Fees		**************************************	
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS	S/CHANGES TO OFF	ICERS AND DIRECTO	DRS IN 11
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NAME	BERTONI, JULIO		NAME	۱ ،	<del>1</del> 040	BULL O		
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CITY-ST-ZIP	MIAMI, FL 33131		CITY-	ST-ZIP	NORTH	MIAM BE	EACH, &L :	2204
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indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empty or on an attachment with a address with	is fitting does not qualify ue and accurate and tha ered to execute this repo	it my signati ort as requiri	mptions contai ure shall have t ed by Chapter	ned in Chapter 1 he same legal effe 607, Florida Statu	<ol> <li>Florida Statutes. I ect as if made under des; and that my name</li> </ol>	further certify that the oath; that I am an offic e appears in Block 10	information er or director or Block 11 if

SIGNATURE: \_

SIGNING OFFICER OR DIRECTOR

03/12/07 (305) 956-2828