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Sep 07, 2005 8:00 am
Secretary of State

05-25-2005 90001 004 ***100.00
04-22-2005 90271 047 ****50.00

66026966

03122005 Chg-P CR2E034 (10/03)

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000011977

1. Entity Name
TF MANUFACTURING CORPORATION

Principal Place of Business	Mailing Address
1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131	1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131

2. Principal Place of Business		3. Mailing Address	
15433 NE 21 AVE		15433 NE 21 AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: NORTH MIAMI BEACH FL		City & State: NORTH MIAMI BEACH FL	
Zip: 33162	Country: DADE	Zip: 33162	Country: DADE

4. FEI Number: 58-2682151 — 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: JULIO BERTONI
Street Address (P.O. Box Number is Not Acceptable): 15433 NE 21 AVE
City: N. MIAMI BEACH FL Zip Code: 33162

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: [signature] DATE: APRIL 2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
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 10		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BERTONI, JULIO		NAME		
STREET ADDRESS	1401 BRICKELL AVENUE, SUITE 825		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

06062966

T.F. MANUFACTURING, 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.: P04000011977

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