

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000171285

Entity Name: TYCARBAL ASSOCIATES INC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

5440 NORTH STATE RD 7
STE 203
FT. LAUDERDALE, FL 33319

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 934960
MARGATE, FL 33093

New Mailing Address:

FEI Number: 20-2045578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, CAROLYN C
36 SPINNING WHEEL LN
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

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 Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOSTER, CAROLYN C
Address: PO BOX 934960
City-St-Zip: MARGATE, FL 33093

Title: VP () Delete
Name: PEART, BALFOUR A
Address: PO BOX 934960
City-St-Zip: MARGATE, FL 33093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CAROLYN C. FOSTER

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date