## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000028993

Entity Name: TCSS INC.

FILED Apr 15, 2009 Secretary of State

Entity Nan	ie. 1000 ino					
Current Principal Place of Business:				New Principal Place of Business:		
	ON POINTE C ON, FL 33496			5560 W.SAMPLE RD MARGATE, FL 33073		
Current Mailing Address:				New Mailing Address:		
	ON POINTE C ON, FL 33496			5560 W.SAMPLE RD MARGATE, FL 33073		
FEI Number:	20-2407196	FEI Number Applied For()	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
NADER, THOMAS SR 6359 AVALON POINTE CT BOCA RATON, FL 33496 US				NADER, CHAU SR 6359 AVALON POINTE CT BOCA RATON, FL 33496 US		
The above in the State		ubmits this statement for the p	purpose o	f changing its registered	d office or registered agent, or both,	
SIGNATURE: CHAU NADER				04/15/2009		
	Electroni	c Signature of Registered Ag	ent		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () NADER, CHAU 6359 AVALON P BOCA RATON, F			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP (X) NADER, THOMA 6359 AVALON P BOCA RATON, F	OINTE CT		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: CHAU NADER CEO 04/15/2009