


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000047292
 1. Entity Name
T.J. GROUP & ASSOCIATES CORP.



Principal Place of Business 1632 SW 139 AVE MIAMI, FL 33175	Mailing Address 1632 SW 139 AVE MIAMI, FL 33175
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DO NOT WRITE IN THIS SPACE



03212007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2594955	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SAN JUAN, TIRSO
 8040 SW 64 STREET
 MIAMI, FL 33143

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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 _____ DATE _____
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, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

00000623324
 04/05/07-80040-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SAN JUAN, TIRSO
STREET ADDRESS	8040 SW 64 STREET
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	PEREZ, JESUS R
STREET ADDRESS	1632 SW 139 AVE
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Tirso San Juan 3/21/07 (786)205-1590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #