## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000051001

Entity Name: TNT-TECHNOLOGIES-BPM CORP.

FILED Mar 26, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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6731 NW 25 WAY

FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

1029 PEACHTREE PARKWAY SUITE # 279 PEACHTREE CITY, GA 30269

FEI Number: 20-4064435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DELLATORRE, MICHAEL
712 ALDERLY LANE
DELLATORRE, THOMAS
712 ALDERLY LANE
712 ALDERLY LANE

FORT LAUDERDALE, FL 33309 US FORT LAUDERDALE, FL 33309 US

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: THOMAS DELLATORRE 03/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 DELLATORRE, THOMAS
 Name:
 DELLATORRE, THOMAS

 Address:
 712 ALDERLY LANE
 Address:
 712 ALDERLY LANE

City-St-Zip: PEACHTREE CITY, GA 30269 US City-St-Zip: PEACHTREE CITY, GA 30269 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 OLIVEIRA, LUIZ
 Name:

 Address:
 101 ROCKSPRAY RIDGE
 Address:

 City-St-Zip:
 PEACHTREE CITY, GA 30269
 City-St-Zip:

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DELLATORRE, MICHAEL
 Name:

 Address:
 6731 NW 25 WAY
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33309
 City-St-Zip:

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DELLATORRE, RACHEL
 Name:

 Address:
 712 ALDERLY LANE
 Address:

 City-St-Zip:
 PEACHTREE CITY, GA 30269
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS DELLATORRE PRES 03/26/2006