

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081342

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: TWIN CITIES INVESTMENT GROUP, INC

## Current Principal Place of Business:

18345 SW 256 ST  
REDLAND, FL 33031

## New Principal Place of Business:

18345 SW 256 ST  
HOMESTEAD, FL 33031

## Current Mailing Address:

13627 DEERING BAY DR.  
1001  
CORAL GABLES, FL 33158

## New Mailing Address:

13627 DEERING BAY DR.  
UNIT 1001  
CORAL GABLES, FL 33158

FEI Number: 20-2987229

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, FERNANDO C.P.A.  
132 MINORCA AVE.  
CORAL GABLES, FL 33134 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: MELNIKOV, PAVEL  
Address: 18345 SW 256 ST.  
City-St-Zip: REDLAND, FL 33031

Title: T ( ) Delete  
Name: MOORE, PAVLINA  
Address: 18345 SW 256 ST.  
City-St-Zip: REDLAND, FL 33031

Title: VP ( ) Delete  
Name: MOORE, JOSEPH R  
Address: 18345 SW 256 ST.  
City-St-Zip: REDLAND, FL 33031

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MELNIKOV, PAVEL  
Address: 18345 SW 256 ST.  
City-St-Zip: HOMESTEAD, FL 33031

Title: T (X) Change ( ) Addition  
Name: MOORE, PAVLINA  
Address: 18345 SW 256 ST.  
City-St-Zip: HOMESTEAD, FL 33031

Title: VP (X) Change ( ) Addition  
Name: MOORE, JOSEPH R  
Address: 18345 SW 256 ST.  
City-St-Zip: HOMESTEAD, FL 33031

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: P. MOORE

T

04/16/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date