

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112150

Entity Name: TM REFERRAL CORP.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

10240 B WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

5491 N UNIVERSITY DR  
104 B  
CORAL SPRINGS, FL 33067

## Current Mailing Address:

10240 B WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065

## New Mailing Address:

5491 N UNIVERSITY DR  
104 B  
CORAL SPRINGS, FL 33067

FEI Number: 20-3449948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALOMONE, THOMAS  
10240 B WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

SALOMONE, THOMAS F  
5491 N. UNIVERSITY DR.  
104 B  
CORAL SPRINGS, FL 33067 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 F. SALOMONE

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SALOMONE, THOMAS  
Address: 10240 B WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V ( ) Delete  
Name: VEISSI, MAURICE  
Address: 10240 B WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SALOMONE, THOMAS F  
Address: 5491 N. UNIVERSITY DR. 104 B  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: V (X) Change ( ) Addition  
Name: VEISSI, MAURICE  
Address: 5491 N. UNIVERSITY DR. 104 B  
City-St-Zip: CORAL SPRINGS, FL 33067

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: THOMAS F. SALOMONE

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date