2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2007
Secretary of State

DOCUMENT# P05000117532

Entity Name: TLC MANAGEMENT ENTERPRISES INC.

Current Principal Place of Business:

PO BOX 507
FT PIERCE, FL 34954

New Principal Place of Business:

13 HARBOUR ISLE DR W-PH6
FT PIERCE, FL 34949

Current Mailing Address:

PO BOX 507
FT PIERCE, FL 34954

New Mailing Address:

FEI Number: 20-3353087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEATHERS, CARMEN J TREASUR
13 HARBOUR ISLE DR-WEST
PH6
FORT PIERCE, FL 34949 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: D ( ) Delete
Name: WEATHERS, ROBERT
Address: PO BOX 507
City-St-Zip: FT PIERCE, FL 34954

Title: D ( ) Delete
Name: WEATHERS, CARMEN
Address: PO BOX 507
City-St-Zip: FT PIERCE, FL 34954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: CARMEN WEATHERS PRES 01/21/2007

Electronic Signature of Signing Officer or Director — Date