

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146110

Entity Name: TEAM RESPONSE INC.

FILED  
May 05, 2007  
Secretary of State

**Current Principal Place of Business:**

4500 BUCHANAN STREET  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**  
4500 BUCHANAN STREET  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 20-3713888      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GEORGIADIS, PETER  
4500 BUCHANAN STREET  
HOLLYWOOD, FL 33021 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GEORGIADIS, PETER  
Address: 4500 BUCHANAN STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP ( ) Change (X) Addition  
Name: GEORGIADIS, MARY ANN  
Address: 4500 BUCHANAN STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: SEC ( ) Change (X) Addition  
Name: GEORGIADIS, KARA  
Address: 4500 BUCHANAN STREET  
City-St-Zip: HOLLYWOOD, FL 33021

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: PETER GEORGIADIS

P

05/05/2007

Electronic Signature of Signing Officer or Director

Date