2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2008 8:00 am Secretary of State 04-07-2008 90042 040 ***150.00

DOCUMENT # P06000016802 1. Entity Name TAT2TIMES STUDIO, INC.									A A		10 13	0.00
Principal Place of Business				Mailing Address				4006	0735	• •		
1510 PALM BAY ROAD				1510 PALM BAY ROAD			ŀ					
SUITE 1				SUITE 1			}					
PALM BAY, FL 32905				PALM BAY, FL 32905				(I ENITE (II	ICHI CHU ICHI CAN	88/II 68/81 /1818 67	at rekik dette tre	1001 IN HOOT
2. Principal Place of Business - No P.O. Box #				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				02042008	Chg-P	CR2E0	34 (12/06)	
City & State				City & State				4. FEI Numbe 20-4272			h	plied For Applicable
Zip		Country		ip	Count	lry			of Status Desire		\$8.75-Add	litional—
	6 Name	and Address of Curre	nt Regist	rered Agent				7 Name and	Address of Nev		Fee Require	•
Name and Address of Current Registered Agent								7. Name and	Addiess of Nev	w Registered A	rgent	
MENCARELLI, ALFRED 1510 PALM BAY ROAD					Street Add	dress (f	P.O. Box Numbe	r is Not Accepta	able)			
SUITE 1 PALM BAY, FL 32905												
3,000					City				FL	Zip Cod	0	
8 The above	named entits	y submits this statement	t for the n	urnoso et changina ita	rogistor	od office or r	ogiator	od nagot or bet	n in the State of		nanitias máth	and and
the obligati	ions of regist	ered agent.	i ioi iiio p	orpose or changing its	ragistare	ou onice or n	ogister	ed agent, or por	ii, iii tile State Oi	i rionua, i ami	annuar willi,	ano accept
SIGNATURE_	Signature typed	or printed name of registered ag	ant and the	annication (NOTE	Danielova	[- 71]		when reinstating)	•	DATE		
		or president and select and		apparatie. (NOTE	negsære	o Agent signature	·ednied	when remstating)		DAIL		
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financia — Trust Fund Contribution.								00 May Be ed to Fees				
10. OFFICERS AND				DIRECTORS 11.				ADDITIONS/	CHANGES TO C	OFFICERS AND	DIRECTOR	S IN 11
TITLE	D			☐ Delete	TITLE	: 1					☐ Change	☐ Addition
NAME	MENCARELLI, ALFRED				E							
STREET ADDRESS CITY-ST-ZIP				STRE								
	PALM BAY, FL 32905				-ST-ZIP				***			
TITLE NAME				☐ Delete	TITLE	1					☐ Change	☐ Addition
STREET ADDRESS					NAM STRE	ET ADDRESS						
CITY-ST-ZIP	<u></u>					-ST-ZIP						
TITLE		-		Delete_	TITLE						☐ Change	Addition
NAME					MAM	I .				_	•	_
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS -ST-ZIP						
TITLE		**		☐ Delete	TITL						☐ Change	Addition
NAME				CT Delete	NAM	I .						☐ Addition
STREET ADDRESS					STRE	E1 ADDRESS						
CITY-ST-ZIP		_			CITY	-S1-ZIP						
TITLE				☐ Delete	TITL	E					☐ Change	☐ Addition
NAME CIDEET ADDOCCO					NAM	1						
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS - ST - ZIP						
TITLE				☐ Delete	TITL		-				☐ Change	Addition
NAME				CT Detete	NAM			*				
STREET ADDRESS			•		STRE	ET ADDRESS	•	- 3	•			
CITY-ST-ZIP				-	CITY	'-ST-ZIP		* •	• •		-	
12. I hereby of indicated	certify that the on this repo	e information supplied vortion supplied vortion supplemental repo	with this for rt is true a	ling does not qualify for and accurate and that r	or the ex ny signa	emptions co ture shall ha	ntained ve the	in Chapter 119 same legal effec	, Florida Statute t as if made und	es. I further cert der oath; that I a	tify that the i	nformation r or director