

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 11, 2007 8:00 am
Secretary of State

04-17-2007 90059 038 ***150.00

DOCUMENT # P06000063408 1. Entity Name THOMAS JEFFERSON INSTITUTE OF TECHNOLOGY, INC.			
Principal Place of Business 6625 MIAMI LAKES DR #348 MIAMI LAKES FL 33014 <i>New Address</i>		Mailing Address 6625 MIAMI LAKES DR #348 MIAMI LAKES FL 33014	
2. Principal Place of Business - No P.O. Box # 551 W. 51 place Suite, Apt. #, etc. # 306		3. Mailing Address 551 W. 51 place Suite, Apt. #, etc. # 306	
City & State HALETH, FL		City & State Hialeth, FL	
Zip 33012		Zip 33012	
Country Miami Code		Country Miami Code	
4. FEI Number 06-1775612		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALFONSO, RICARDO 6625 MIAMI LAKES DR #348 MIAMI LAKES FL 33014 <i>551 W. 51 place Hialeth</i> <i># 306 FL 33012</i>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PT <input type="checkbox"/> Delete NAME ALFONSO, RICARDO STREET ADDRESS 6625 MIAMI LAKES DR #348 CITY- ST- ZIP MIAMI LAKES FL 33014	TITLE PT <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME ALFONSO, RICARDO STREET ADDRESS 6625 MIAMI LAKES DR #348 CITY- ST- ZIP MIAMI LAKES FL 33014	TITLE PT <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME ALFONSO, RICARDO STREET ADDRESS 6625 MIAMI LAKES DR #348 CITY- ST- ZIP MIAMI LAKES FL 33014	TITLE PT <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME ALFONSO, RICARDO STREET ADDRESS 6625 MIAMI LAKES DR #348 CITY- ST- ZIP MIAMI LAKES FL 33014
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		04/01/07 (305) 244-9355 <small>Date Daytime Phone</small>	

ATTACHMENT

002469.241811.0010.001 2 MB 0.563 1020

~~Date of this notice:~~ 05-01-2006

Employer Identification Number:
06-1775612

Form: SS-4

Number of this notice: CP 575 A

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

~~WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER~~

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 06-1775612. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label we provided. If this isn't possible, it is very important that you use your EIN and complete name and address exactly as shown above on all federal tax forms, payments and related correspondence. Any variation may cause a delay in processing, result in incorrect information in your account or even cause you to be assigned more than one EIN. If the information isn't correct as shown above, please correct it using tear off stub from this notice and return it to us so we can correct your account.

Based on the information from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941
Form 1120
Form 940

07/31/2006
03/15/2007
01/31/2007

If you have questions about the form(s) or the due dates(s) shown, you can call or write to us at the phone number or address at the top of the first page of this letter. If you need help in determining what your tax year is, see Publication 536, Accounting Periods and Methods, available at your local IRS office or you can download this Publication from our Web site at www.irs.gov.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination on your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue.)