2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

May 01, 2007 8:00 am Secretary of State **DOCUMENT # P06000135856** 05-01-2007 90012 004 ***150.00 T N T AND CO. INCORPORATED ,400340×v Principal Place of Business 13951 SW 66TH-STREET 13951 SW 86TH STREET UNIT A-301 UNIT ASS MIAMIL FT 38183 MIAMI, FL 33183 Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. 02122007 CR2E034 (12/06) City & State Applied For 42-1714614 Not Applicable Country Zío. \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TETEDA TEJEDA, ESTEBAN R 13951 SWIGOTH STREET UNIT 4-301 Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33183 Zip Code 33178 8. The above named gritty 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 Ret. Acons SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete Steven TEJEDA ☐ Change TITLE TITLE TEJEDA, ESTEBAN R NAME NAME 9960 NW 116WAY Ste9 13951 SW 66TH STREET STREET ADDRESS STREET ADORESS CITY-ST-ZIP MIAMI, FL 33183 CITY-ST-ZIP MIAMI FL 23/78 Addition Delete TITLE V TITLE ANA TEJEDA NAME NAME STREET ADDRESS STREET ADDRESS 9960 NW 116WAYSte9 Miami, FL 33178 CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the intermation supplied with this filing does not qualify for the exemptions contained 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 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 a

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