

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000049856

FILED  
Apr 30, 2011  
Secretary of State

Entity Name: TImESTAMP, INC.

**Current Principal Place of Business:**

19201 COLLINS AVE.  
UNITE# 815  
SUNNY ISLES BEACH, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 50774  
SARASOTA, FL 34236 US

**New Mailing Address:**

FEI Number: 38-3800906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

USA LICENSE BOKERAGE & AGENCY INTL., LLC.  
677 NORTH WASHINGTON BLVD.  
SUITE# 57  
SARASOTA, FL 34236 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

**OFFICERS AND DIRECTORS:**

Title: PTSD  
Name: POPPER, ADAM  
Address: 19201 COLLINS AVE., UNITE# 815  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: S  
Name: TOROK, TAMAS  
Address: 19201 COLLINS AVE., UNITE# 815  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

I hereby 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 all other like empowered.

SIGNATURE: ADAM POPPER

PDST

04/30/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date