

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000062964

Entity Name: B.T.T. CORPORATION

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

3533 NW 58TH STREET
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

3533 NW 58TH STREET
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 65-0460078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, DAVID
3533 NW 58TH STREET
MIAMI, FL 33142 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COHEN, DAVID
Address: 3533 NW 58TH STREET
City-St-Zip: MIAMI, FL 33142

Title: VP () Delete
Name: COHEN, ANA
Address: 3533 NW 58TH STREET
City-St-Zip: MIAMI, FL 33142

Title: S () Delete
Name: COHEN, MARCELO
Address: 3533 NW 58TH STREET
City-St-Zip: MIAMI, FL 33142

Title: T () Delete
Name: COHEN, GILBERTO
Address: 3533 NW 58TH STREET
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: COHEN DAVID

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date