## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000062964

Entity Name: B.T.T. CORPORATION

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

353 SW 8TH STREET 535 SW 8TH STREET MIAMI, FL 33130 US MIAMI, FL 33130 US

Current Mailing Address: New Mailing Address:

353 SW 8TH STREET 535 SW 8TH STREET MIAMI, FL 33130 US MIAMI, FL 33130 US

FEI Number: 65-0460078 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COHEN, DAVID
353 SW 8TH STREET
MIAMI, FL 33130 US

COHEN, DAVID
535 SW 8TH STREET
MIAMI, FL 33130 US

MIAMI, FL 33130 US

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: MARCELO COHEN 04/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

353 SW 8TH STREET

MIAMI, FL 33130

## **OFFICERS AND DIRECTORS:**

Name: Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: COHEN, DAVID Name: COHEN, DAVID

 Name
 Conein, DAVID
 Name
 Conein, DAVID

 Address:
 353 SW 8TH STREET
 Address:
 535 SW 8TH STREET

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:
 MIAMI, FL 33130

 Name:
 COHEN, ANA
 Name:
 COHEN, ANA

 Address:
 353 SW 8TH STREET
 Address:
 535 SW 8TH STREET

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:
 MIAMI, FL 33130

 Name:
 COHEN, MARCELO
 Name:
 COHEN, MARCELO

 Address:
 353 SW 8TH STREET
 Address:
 535 SW 8TH STREET

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:
 MIAMI, FL 33130

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: COHEN, GILBERTO Name: COHEN, GILBERTO

Name: COHEN, GILBERTO
Address: 535 SW 8TH STREET
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARCELO COHEN D 04/27/2009