

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000014171

Entity Name: TOTAL CONCEPT, INC.

FILED
Jan 15, 2005
Secretary of State

Current Principal Place of Business:

4632 VINCENNES BLVD
CAPE CORAL, FL 33904

New Principal Place of Business:

4632 VINCENNES BLVD
102
CAPE CORAL, FL 33904

Current Mailing Address:

4632 VINCENNES BLVD
CAPE CORAL, FL 33904

New Mailing Address:

4632 VINCENNES BLVD
102
CAPE CORAL, FL 33904

FEI Number: 65-0466514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSINA, THOMAS
4632 VINCENNES BLVD
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

MESSINA, THOMAS
4632 VINCENNES BLVD
102
CAPE CORAL, FL 33904 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:

01/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MESSINA, THOMAS
Address: 4632 VINCENNES BLVD
City-St-Zip: CAPE CORAL, FL 33904

Title: S () Delete
Name: MESSINA, GAYLE
Address: 4632 VINCENNES BLVD.
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MESSINA, THOMAS
Address: 4632 VINCENNES BLVD, 102
City-St-Zip: CAPE CORAL, FL 33904

Title: S (X) Change () Addition
Name: MESSINA, GAYLE
Address: 4632 VINCENNES BLVD., 102
City-St-Zip: CAPE CORAL, FL 33904

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: THOMAS MESSINA

DP

01/15/2005

Electronic Signature of Signing Officer or Director

Date