2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000014778

Entity Name: TCB SYSTEMS, INC

Name:

Address:

City-St-Zip:

ORUE, ZOILA

3780 SW 148 PL

MIAMI, FL 33185

FILED Jan 27, 2009 Secretary of State

Littly Nan	ie. ICBSI	STEIVIS, IINC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
11861 SW BAY 3 MIAMI, FL					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
11861 SW BAY 3 MIAMI, FL		3			
FEI Number:	65-0472355	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ORUE, ROBERT 3780 SW 148 PL MIAMI, FL 33185 US			EDDY, MAESTRI 11861 SW 144 CT BAY # 5 MIAMI, FL 33186 US	11861 SW 144 CT BAY # 5	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: EDDY MAESTRI				01/27/2009	
Election Cam		onic Signature of Registered Agen ng Trust Fund Contribution ().	t	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (ORUE, ROBE 3780 SW 148 MIAMI, FL 33	3 PL	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	SD (ORUE, ZOILA 3780 SW 148 MIAMI, FL 33	3 PL	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title:	TD () Delete	Title: () Change ()Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT ORUE PRES 01/27/2009