

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 10, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000032347

1. Entity Name
TURBOVISION CONSULTING GROUP, INC.



Principal Place of Business
**8365 SW 104TH ST
MIAMI, FL 33156 US**

Mailing Address
**8365 SW 104TH ST
MIAMI, FL 33156 US**

*Did not receive preprinted form
in mail - I have filed
reports since '95*

*ps. - could not file online
system fails and reports
time expired.*



05082007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0574837

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

I am a registered agent, or both, in the State of Florida. I am familiar with, and accept

4/25/07

(red when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KOFF, STEVEN G
STREET ADDRESS	6490 SW 102ND ST
CITY - ST - ZIP	PINECREST, FL 33156
TITLE	D
NAME	KOFF, ANA I
STREET ADDRESS	6490 SW 102ND ST
CITY - ST - ZIP	PINECREST, FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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05/29/07-80040-012 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07

Date

3054128944

Daytime Phone #