

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000040237

Entity Name: TMT PROPERTIES, INC.

FILED  
Apr 07, 2009  
Secretary of State

## Current Principal Place of Business:

3860 NW 118TH AVE  
CORAL SPRINGS, FL 33065 US

## New Principal Place of Business:

3921 NW 126TH AVENUE  
CORAL SPRINGS, FL 33065 US

## Current Mailing Address:

PO BOX 970354  
COCONUT CREEK, FL 33097 US

## New Mailing Address:

FEI Number: 65-0589607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURRELL, PAUL  
5301 GODFREY RD  
POMPANO BEACH, FL 33067 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: PD ( ) Delete  
Name: BURRELL, PAUL M  
Address: 5301 GODFREY RD  
City-St-Zip: POMPAN BEACH, FL 33067

Title: VPS ( ) Delete  
Name: BURRELL, SUSAN  
Address: 5301 GODFREY ROAD  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VPT ( ) Delete  
Name: BURRELL, VICTORIA  
Address: 4769 NW 30TH ST  
City-St-Zip: COCONUT CREEK, FL 33063

## 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:

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: VICTORIA BURRELL

VPT

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date