

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000051572

FILED
Feb 23, 2009
Secretary of State

Entity Name: TIDAL WAVE INVESTMENT CORPORATION, INC.

Current Principal Place of Business:

5915 PONCE DE LEON BLVD.
SUITE 60
CORAL GABLES, FL 33146

New Principal Place of Business:

1660 NW 19 AVE
POMPANO BEACH, FL 33069

Current Mailing Address:

5915 PONCE DE LEON BLVD.
SUITE 60
CORAL GABLES, FL 33146

New Mailing Address:

1660 NW 19 AVE
POMPANO BEACH, FL 33069

FEI Number: 65-0600909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENDER, HARRY K
5915 PONCE DE LEON BLVD.
SUITE 60
CORAL GABLES, FL 33146 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: D () Delete
Name: FEELEY, JOHN J JR
Address: 5915 PONCE DE LEON BLVD. #60
City-St-Zip: CORAL GABLES, FL 33146

Title: PVD () Delete
Name: CASAGRANDE, JACK R
Address: 5915 PONCE DE LEON BLVD. #60
City-St-Zip: CORAL GABLES, FL 33146

Title: SD () Delete
Name: JOHNSON, WILLIAM B
Address: 5915 PONCE DE LEON BLVD. # 60
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: MARZANO, PATRICK
Address: 5915 PONCE DE LEON BLVD #60
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FEELEY, JOHN J JR
Address: 1660 NW 19 AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: PVD (X) Change () Addition
Name: CASAGRANDE, JACK R
Address: 1660 NW 19 AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: SD (X) Change () Addition
Name: JOHNSON, WILLIAM B
Address: 1660 NW 19 AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: D (X) Change () Addition
Name: MARZANO, PATRICK
Address: 1660 NW 19 AVE.
City-St-Zip: POMPANO BEACH, FL 33069

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: JACK R CASAGRANDE

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date