


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 23, 2006 08:00 AM
Secretary of State**

DOCUMENT # P96000021759		
1. Entity Name TTA OF FLORIDA, INC.		
Principal Place of Business 2630 ALOE AVE. POMPANO BEACH, FL 33063	Mailing Address 2630 ALOE AVE. POMPANO BEACH, FL 33063	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RANDAZZO, VINCENT 2630 ALOE AVE. POMPANO BEACH, FL 33063		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature typed or printed name of registered agent and LLC if applicable (NOTE: Registered Agent signature required when reissuing)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RANDAZZO, VINCENT 2630 ALOE AVENUE COCONUT CREEK, FL 33063	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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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: <u>Vincent Randazzo</u> 1/18/06 954 979-009 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day and Phone #</small>		



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0667814	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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01/25/06-80036-008 150.00

**DO NOT WRITE
IN THIS SPACE**