

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025992

Entity Name: TEJADA HOLDINGS, INC.

FILED  
Feb 10, 2008  
Secretary of State

## Current Principal Place of Business:

6880 SW 132 STREET  
MIAMI, FL 33156

## New Principal Place of Business:

## Current Mailing Address:

6880 SW 132 STREET  
MIAMI, FL 33156

## New Mailing Address:

FEI Number: 65-0663034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TEJADA, FRANCISCO  
6880 SW 132 STREET  
MIAMI, FL 33156 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: VTD ( ) Delete  
Name: TEJADA, BARBARA ANN  
Address: 6880 SW 132 ST  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: TEJADA, FRANCISCO  
Address: 9864 GREENBRIAR WAY  
City-St-Zip: BALTIMORE, MD 21220

Title: D ( ) Delete  
Name: TEJADA, JAMES  
Address: 6880 SW 132ND ST  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: TROTTO, SEMIRAMIS  
Address: 142 HARRISON AVE  
City-St-Zip: WESTFIELD, NJ 07090

Title: D ( ) Delete  
Name: FRANK, ANA MARIA  
Address: 8201 SW 170 TERR  
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete  
Name: TEJADA, BARBARA LEE  
Address: 4570 13ST APY #101  
City-St-Zip: BOULDER, CO 80304

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: TEJADA, FRANCISCO  
Address: 8604 FOWLER AVENUE  
City-St-Zip: PARKVILLE, MD 21234

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BARBARA ANN TEJADA

VTD

02/10/2008

Electronic Signature of Signing Officer or Director

Date