

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025992

Entity Name: TEJADA HOLDINGS, INC.

FILED
Jan 14, 2009
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: 8604 FOWLER AVENUE
City-St-Zip: PARKVILLE, MD 21234

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

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

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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

01/14/2009

Electronic Signature of Signing Officer or Director

Date