

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000091330

Entity Name: TLSAE, INC.

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6919 W. BROWARD BLVD.  
#286  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

6919 W. BROWARD BLVD.  
#286  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 65-0708879

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SASLAW, GARY R  
20801 BISCAYNE BLVD STE 304  
AVENTURA, FL 33180 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: DCST  
Name: SASLAW, GARY  
Address: 20801 BISCAYNE BLVD. STE 304  
City-St-Zip: AVENTURA, FL 33180

Title: P  
Name: PREMIER, HOWARD  
Address: 6919 W. BROWARD BLVD.  
City-St-Zip: PLANTATION, FL 33317

I hereby 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 all other like empowered.

SIGNATURE: HOWARD PREMIER

PRES

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date