

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2008 8:00 am
Secretary of State

04-15-2008 90011 034 ***150.00

DOCUMENT # P97000105953	
1. Entity Name TGF PRODUCTIONS, INC.	

Principal Place of Business 970 NORTH ROYAL POINCIANA BLVD MIAMI SPRINGS FL 33166	Mailing Address 970 NORTH ROYAL POINCIANA BLVD MIAMI SPRINGS FL 33166
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66009727



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/07)

4. FEI Number 65-0814447		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FUSTE, THOMAS GARCIA 970 NORTH ROYAL POINCIANA BLVD MIAMI SPRINGS FL 33166		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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

Signature, typed or printed name of registered agent and date (if applicable)

(NOTE: Registered Agent signature required when applicable)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	FUSTE, THOMAS GARCIA		NAME		
STREET ADDRESS	970 NORTH ROYAL POINCIANA BLVD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	FUSTE, TOMAS GARCIA		NAME		
STREET ADDRESS	970 N. ROYAL POINCIANA BLVD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33166		CITY-ST-ZIP		
TITLE	V	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	FUSTE, LINA G		NAME		
STREET ADDRESS	970 N ROYAL PONCIANA BLVD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		CITY-ST-ZIP		
TITLE	VS	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	FUSTE, LINA		NAME		
STREET ADDRESS	970 N ROYAL POINCIANA BLVD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 but like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/08 (786) 433 3427
Date Day/Mo/Yr