

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061248

FILED
Mar 08, 2005
Secretary of State

Entity Name: T & T BENEFITS ADMINISTRATION, INC.

Current Principal Place of Business:

3472 NW 110TH WAY
CORAL SPRINGS, FL 33065

New Principal Place of Business:

10339 WEST SAMPLE RD
CORAL SPRINGS, FL 33065

Current Mailing Address:

3472 NW 110TH WAY
CORAL SPRINGS, FL 33065

New Mailing Address:

10339 WEST SAMPLE RD
CORAL SPRINGS, FL 33065

FEI Number: 65-0854942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, NATALIE
3472 NW 110TH WAY
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

TORRES, NATALIE
10339 WEST SAMPLE RD
CORAL SPRINGS, FL 33065 US

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:

03/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TORRES, NATALIE
Address: 3472 NW 110TH WAY
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Delete
Name: TORRES, HARRY
Address: 3472 NW 110TH WAY
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TORRES, NATALIE
Address: 10339 WEST SAMPLE RD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP (X) Change () Addition
Name: TORRES, HARRY
Address: 10339 WEST SAMPLE RD
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARRY TORRES

VP

03/08/2005

Electronic Signature of Signing Officer or Director

Date