

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025799

FILED  
Apr 15, 2010  
Secretary of State

**Entity Name:** TOTAL CONCEPT ENTERPRISES INCORPORATED

**Current Principal Place of Business:**

5036 DR. PHILLIPS BLVD.  
SUITE 377  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

5036 DR. PHILLIPS BLVD.  
SUITE 377  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 59-3569156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GROSMAN REPUBLIC, LLC  
5036 DR. PHILLIPS BLVD.  
#377  
ORLANDO, FL 32819 US

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

NOGA GROSMAN  
5036 DR. PHILLIPS BLVD.  
#377  
ORLANDO, FL 32819 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: NOGA GROSMAN

04/15/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GROSMAN, NOGA PRESID  
Address: 1820 HEMPEL AVE.  
City-St-Zip: WINDERMERE, FL 34786

Title: SC  
Name: WARREN, EDWARD A  
Address: 745 BAINBRIDGE LOOP  
City-St-Zip: WINTER GARDEN, FL 34787

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: NOGA GROSMAN

PD

04/15/2010

Electronic Signature of Signing Officer or Director

Date