2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P99000108171

Entity Name: TRANSITORY MANAGEMENT AND CONSULTING GROUP, INC.

Current Principal Place of Business:

2655 SOUTH LE JUNE RD
SUITE 403
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2655 SOUTH LE JUNE RD
SUITE 403
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0974185 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALFANO, ALEXANDER J ESQ
2655 SOUTH LE JUNE RD
SUITE 403
CORAL GABLES, FL 33134 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: PD ( ) Delete
Name: TABRAUE, JORGE
Address: 2655 SOUTH LE JUNE RD, SUITE 403
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP ( ) Delete
Name: TABRAUE, CHRIS
Address: 2655 SOUTH LE JUNE RD, SUITE 403
City-St-Zip: MIAMI, FL 33134 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MOJENA, FELIX
Address: 2655 SOUTH LE JUNE RD, SUITE 403
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP (X) Change ( ) Addition
Name: GUTIERREZ, IVANITA I
Address: 2655 SOUTH LE JUNE RD, SUITE 403
City-St-Zip: MIAMI, FL 33134 US

Title: VM ( ) Change (X) Addition
Name: PESTANO, ELVIRA
Address: 2655 SOUTH LE JUNE RD, SUITE 403
City-St-Zip: MIAMI, FL 33134 US

Title: SEC ( ) Change (X) Addition
Name: AGUIAR, AIDE
Address: 2655 SOUTH LE JUNE RD, SUITE 403
City-St-Zip: MIAMI, FL 33134 US

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: JORGE TABRAUE PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date