

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S52590

Entity Name: TEE NO. 2, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

200 SOUTH BISCAYNE BLVD.
SIXTH FLOOR
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

200 SOUTH BISCAYNE BLVD.
SIXTH FLOOR
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0284055 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEIDER, NORMAN S., ESQ.
SUITE 3910
100 S.E. 2ND ST.
MIAMI, FL 331319112 US

Name and Address of New Registered Agent:

WEIDER, NORMAN S., ESQ.
200 SO. BISCAYNE BLVD.
6TH FLOOR
MIAMI, FL 33131 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: _____ 04/21/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LARSSON, HANS
Address: S 111 46 STOCKHOLM
City-St-Zip: SWEDEN, SW

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPS () Delete
Name: BRANT, BARRY
Address: C/O BDPB, 200 S. BISCAYNE BLVD. 6TH FLR
City-St-Zip: MIAMI, FL 33131 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HANS LARSSON DP 04/21/2009
Electronic Signature of Signing Officer or Director Date