## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S78142

FILED Apr 16, 2009 Secretary of State

Entity Name: T & D PROPERTIES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:		New Principal Place of Business:
550 BILTM0	ORE WAY	
	ABLES, FL 33134 US	
Current Mailing Address:		New Mailing Address:
550 BILTMO	ORE WAY ABLES, FL 33134 US	
		Number Not Applicable ( ) Cortificate of Status Desired ( )
FEI Number:	65-0280888 FEI Number Applied For ( ) FEI	Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:
OTERO, ROBERT L 14817 OAK LANE MIAMI LAKES, FL 33016 US		GRACIA, LIONEL L 14817 OAK LANE MIAMI LAKES, FL 33016 US
The above in the State		e of changing its registered office or registered agent, or both,
SIGNATURE: LIONEL GRACIA		04/16/2009
	Electronic Signature of Registered Agent	Date
Election Cam	npaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () Delete ORTIZ, RAMIRO 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	EVTD () Delete LOPEZ, HUMBERTO 255 ALHAMBRA CIR CORAL GABLES, FL 33134	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	EVD ( ) Delete GARCIA, FELIX 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	Title: EVSD (X) Change ( ) Addition Name: GARCIA, FELIX Address: 255 ALHAMBRA CIRCLE City-St-Zip: CORAL GABLES, FL 33134
Title: Name: Address: City-St-Zip:	SVS ( ) Delete BLAISE, BRUCE 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	Title: SVS (X) Change ( ) Addition Name: PURDY, RICHARD Address: 14817 OAK LANE City-St-Zip: MIAMI LAKES, FL 33016
Title: Name: Address: City-St-Zip:	AV ( ) Delete LOPEZ, JUDITH 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	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: RAMIRO ORTIZ P 04/16/2009