2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006702

Entity Name: NMBPD - TOUR DE FORCE, INC.

Current Principal Place of Business:

ATTN: CRAIG CATLIN 16901 NE 19TH AVENUE

NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

ATTN: CRAIG CATLIN 16901 NE 19TH AVENUE

NORTH MIAMI BEACH, FL 33162

FEI Number: 65-1005145 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

H. JAMES CATLIN, JR. 1700 ALFRED I. DUPONT BUILDING 169 E. FLAGLER STREET 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:

Electronic Signature of Registered Agent

Date

FILED Mar 17, 2014

Secretary of State

CC8802221440

Officer/Director Detail:

Title PD Title VD

 Name
 CATLIN, CRAIG
 Name
 DORAS, BRUCE

 Address
 16901 NE 19 AVE
 Address
 1011 NW 111 AVE

 City-State-Zip:
 NORTH MIAMI BEACH FL 33162
 City-State-Zip:
 MIAMI FL 33172

Title D Title D

NameLOVE, DENISENameDARDEN, YVETTEAddress16901 NE 19 AVEAddress16901 NE 19 AVE

City-State-Zip: NORTH MIAMI BEACH FL 33162 City-State-Zip: NORTH MIAMI BEACH FL 33162

Title D Title T, S

Name FRANCIONI, JOHN Name GREENBERG, HILARY

Address 16901 NE 19 AVE Address 16901 NE 19 AVE

City-State-Zip: NORTH MIAMI BEACH FL 33162 City-State-Zip: NORTH MIAMI BEACH FL 33162

PRESIDENT

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.