

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038025

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: TBI L.L.C.

**Current Principal Place of Business:**

943 NW 31 AVE  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

917 NW 31 AVE  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

PO BOX 667306  
POMPANO BEACH, FL 33066

**New Mailing Address:**

FEI Number: 20-1128964      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BECRAFT, MARSHA L  
2415 SW 35 AVE  
DELRAY BCH, FL 33445      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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BECRAFT, THOMAS E  
Address: 2415 SW 35 AVE  
City-St-Zip: DELRAY, FL 33445

Title: MGRM ( ) Delete  
Name: BECRAFT, MARSHA L  
Address: 2415 SW 35 AVE  
City-St-Zip: DELRAY, FL 33445

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARSHA BECRAFT      MGRM      04/14/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date