2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 30, 2006
Secretary of State

DOCUMENT# L04000059721

Entity Name: TACTICAL OPERATIONAL SUPPORT SERVICES LLC

Current Principal Place of Business:

308 TEQUESTA DRIVE
SUITE 21
TEQUESTA, FL 33469 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3461
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 20-3543820 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MARTINEZ HAYES, ESTHER
123 MAGNOLIA WAY
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

MARTINEZ HAYES, ESTHER MRS
308 TEQUESTA DRIVE
SUITE 21
TEQUESTA, FL 33469 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: ESTHER MARTINEZ-HAYES 05/30/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MARTINEZ HAYES, ESTHER
Address: 123 MAGNOLIA WAY
City-St-Zip: TEQUESTA, FL 33469 US

Title: MEMB (X) Delete
Name: HAYES, JOHN R MEMBER
Address: 123 MAGNOLIA WAY
City-St-Zip: TEQUESTA, FL 33469 US

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 Chapter 119, 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: ESTHER MARTINEZ-HAYES MGR 05/30/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date