

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000032421

**Entity Name:** T.I.M.M.P., LLC

**Current Principal Place of Business:**

7730 PALM RIVER DR.  
TAMPA, FL 33619

**Current Mailing Address:**

10202 TUCKER JONES RD.  
RIVERVIEW, FL 33578 US

**FEI Number: 80-0566500**

**Certificate of Status Desired: No**

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

EMIL, NEGRU  
10202 TUCKER JONES RD.  
RIVERVIEW, FL 33578 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

**Authorized Person(s) Detail :**

Title MGRM  
Name EMIL, NEGRU  
Address 10202 TUCKER JONES RD.  
City-State-Zip: RIVERVIEW FL 33578

Title MGRM  
Name ANISOARA, NEGRU  
Address 10202 TUCKER JONES RD.  
City-State-Zip: RIVERVIEW FL 33578

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ANISOARA NEGRU**

**MANAGER**

**04/16/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date