2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000003403

1. Entity Name
TYE HOLDINGS, LLC

FILED
Apr 02, 2007 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
2556 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065	2556 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065

03192007 No Chg-LLC CR2E083 (11/05)

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4. FEI Number
65-1037124

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHACHTER, SAMUEL
2556 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SCHACHTER, SAMUEL
STREET ADDRESS	2556 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	MGR
NAME	SCHACHTER, MALCA
STREET ADDRESS	2556 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
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CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: S Schachter 3/28/07 (954) 753-0170
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #