2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

05-09-2006 90010 010 ****50.00 **DOCUMENT # L02000009320** TLC MANAGEMENT SERVICES, LLC Principal Place of Business Mailing Address 201 S. BISCAYNE BLVD., SUITE 1500(LAD) 201 S. BISCAYNE BLVD., SUITE 1500(LAD) 30010386 ___ MIAMI, FL 33131 MIAMI, FL 33131 01092006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 01-0669995 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CORPORATION COMPANY OF MIAMI DO NOT WRITE 201 S. BISCAYNE BLVD., SUITE 1500(LAD) MIAMI, FL 33131 IN THIS SPACE 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. (NOTE: Registered Agent stonesure required when minetating) DATE Filing Fee is \$50.00 Due by May 1, 2008 MANAGING MEMBERS/MANAGERS 0. MGRM TITLE SANCHEZ-JAIMES, JONATHAN NAME STREET ADDRESS 10300 OLD CUTLER ROAD CITY-ST-ZIP MIAMI, FL 33156 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CTY-ST-ZP TITLE STREET ACCRESS CITY-ST-70 11. I hereby certify that the information supplied with this filing documet quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate such that my significant 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 empty and to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

305-379-9114

FILED Jun 15, 2006 8:00 am

Secretary of State