

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028288

FILED
Apr 30, 2005
Secretary of State

Entity Name: TLB TECHNICAL SOLUTIONS, LLC

Current Principal Place of Business:

5260 SW 131 TERRACE
MIRAMAR, FL 33027

New Principal Place of Business:

11521 NW 31 PLACE
SUNRISE, FL 33323

Current Mailing Address:

5260 SW 131 TERRACE
MIRAMAR, FL 33027

New Mailing Address:

11521 NW 31 PLACE
SUNRISE, FL 33323

FEI Number: 83-0340534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNER, MARTIN
5260 SW 131 TERRACE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

TURNER, MARTIN
11521 NW 31 PLACE
SUNRISE, FL 33323 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: MARTIN TURNER

04/30/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TURNER, MARTIN
Address: 5260 SW 131 TERRACE
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM () Delete
Name: TURNER, MIA
Address: 5260 SW 131 TERRACE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: TURNER, MARTIN
Address: 11521 NW 31 PLACE
City-St-Zip: SUNRISE, FL 33323

Title: VPD (X) Change () Addition
Name: TURNER, MIA
Address: 11521 NW 31 PLACE
City-St-Zip: SUNRISE, FL 33323

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: MARTIN TURNER

PD

04/30/2005

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