

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004169

Entity Name: MTS ALLIANCE, LLC

FILED
Jan 13, 2005
Secretary of State

Current Principal Place of Business:

11282 W. HILLSBOROUGH AVENUE
TAMPA, FL 33635

New Principal Place of Business:

3919 78TH AVENUE
PINELLAS PARK, FL 337812527

Current Mailing Address:

11282 W. HILLSBOROUGH AVENUE
TAMPA, FL 33635

New Mailing Address:

3919 78TH AVENUE
PINELLAS PARK, FL 337812527

FEI Number: 06-1676618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CARRIGAN, THOMAS J
Address: 11282 W. HILLSBOROUGH AVENUE
City-St-Zip: TAMPA, FL 33635

Title: MGR () Delete
Name: SIDDIQUI, SAMRA
Address: 11282 W. HILLSBOROUGH AVENUE
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SIDDIQUI, SAMRA
Address: 6342 BONNIE BAY CIRCLE
City-St-Zip: PINELLAS PARK, FL 33781

Title: MGR (X) Change () Addition
Name: ADIL, ANSARI
Address: 3919 78TH AVE
City-St-Zip: PINELLAS PARK, FL 337812527

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: SAMRA SIDDIQUI

MGR

01/13/2005

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