

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045724

FILED  
Apr 16, 2008  
Secretary of State

**Entity Name:** TRANSWORLD BUSINESS BROKERS OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

4700 MILLENIA BOULEVARD  
SUITE 270  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

4700 MILLENIA BOULEVARD  
SUITE 270  
ORLANDO, FL 32839

**New Mailing Address:**

5101 NW 21ST AVENUE  
SUITE 300  
FORT LAUDERDALE, FL 33309

**FEI Number:** 20-0527145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLODIG, GREGORY J  
100 W CYPRESS CREEK RD, STE 700  
FORT LAUDERDALE, FL 33309 US

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

GRECCO, PAUL G JR  
5101 NW 21ST AVENUE  
SUITE 300  
FORT LAUDERDALE, FL 33309 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: PAUL G. GRECCO, JR.

04/16/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CAGNETTA, ANDREW R JR  
Address: 4700 MILLENIA BOULEVARD  
City-St-Zip: ORLANDO, FL 32839

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CAGNETTA, ANDREW R JR  
Address: 5101 NW 21ST AVENUE, STE 300  
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANDREW R. CAGNETTA, JR.

MGRM

04/16/2008

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