... 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE

RE AND TYPED OR PRINTED NAME

Apr 07, 2005 8:00 am **DOCUMENT # L03000052175** Secretary of State 1. Entity Name 04-07-2005 90091 015 ****50.00 TCR SOLUTIONS, LLC Principal Place of Business Mailing Address 3460 W. 84 STREET 3460 W. 84 STREET 20027589 **SUITE 104** SUITE 104 HIALEAH, FL 33018 US HIALEAH, FL 33018 US 2. Principal Place of Business 3. Mailing Address 1163 CHEDILLE crecle 1163 CHEVELLE CIRCLE Suite, Apt. #, etc. Suite, Apt. #, etc. 03282005 CR2E083 (10/03) Chg-LLC City & State City & State 4. FEI Number Applied For FC WESTOW WESTON, 20-0498139 Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IORRES JUPA TORRES, JUAN Street Address (P.O. Box Number is Not Acceptable) 3460 W. 84 STREET, SUITE 104 HIALEAH, FL 33018 1163 CHEDINE CIRCLE 8. The above name purpose of changing its registered office or registered agent, or both, in the State of Florida. I am famillar with, and accept the obligations SIGNATURE DATE and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee Je \$50.00 Make check payable to Due by May 1, 2005 Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM. TITLE MGRM ☐ Delete TITLE Change ☐ Adaition BERTORELLI - MOREDO, Alfredo BERTORELLI-MORENO, ALFREDO NAME NAME 1163 CHEWILLE CIRCLE STREET ADDRESS 3460 W. 84 STREET, SUITE 104 STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33018 CITY-ST-ZIP WESTON, FL 333ZA **MGRM** ☐ Delete MGRH TITLE TITLE Change : ☐ Addition RERTOTREUS - GUERRA, Alfredo BERTORELLI-GUERRA, ALFREDO STREET ADDRESS 3460 W. 84 STREET, SUITE 104 STREET ADDRESS 1163 CHENTILE CIRCLE CITY-ST-ZIP CITY-ST-ZIP HIALEAH, FL 33018 WESTON, FL 33327 MGRM ☐ Delete MGZM. TITLE TITLE Change ☐ Addition ALARCON, ANIBAL ALARCON, ANDEBAL NAME NAME STREET ADDRESS 3460 W. 84 STREET, SUITE 104 STREET ADDRESS 1163 CHETOTILE CORCLE CITY-ST-ZIP CITY-ST-ZIP WESTON, FL 33018 WESTON, 33327 Addition MGRH TITLE MGRM Delete TITLE Change ESPIGA, FRANKLIN ESPIGA, TRANKLIN NAME NAME STREET ADDRESS 3460 W. 84 STREET, SUITE 104 STREET ADDRESS 1163 CHENTILE CERCLE CITY-ST-ZIP CITY-ST-ZIP WESTON, FL 33018 WESTON, FC ☐ Delete TITLE MGRM. Change MGRM ☐ Addition TITLE NAME PEREZ, TEODORO PEREZ, TEODORO 1143 CHENOTILE CORCLE STREET ADDRESS 3460 W. 84 STREET, SUITE 104 STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33018 CITY-ST-ZIP WESTON, F HERNO TITLE **MGRM** Delete TITLE Change Change ☐ Addition ESPIGA, CARLOS ESDIGA, CARLOS NAME NAME 1163 CHEVITTLE CIRCLE STREET ADDRESS 3460 W. 84 STREET, SUITE 104 STREET ADDRESS HIALEAH, FL 33018 CITY-ST-ZIP CiTY-ST-7/P WESTON, FL 33324 11. I hereby certify that the information supplied with this filing does not qualify 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 limited liability company or the reg my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the powered to execute this report as required by Chapter 608, Florida Statutes.

SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

Osytime Phone #

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # LO3000052175 1. Entity Name TCR SOLUTIONS, U.C.			AT	TACHMENT		
Principal Place of Business	Mailing Address			0.		
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WW10211 C 55324	WESTON, FLE	5006+		400	10	
2. Principal Place of Business	3. Mailing Address		┨.			2.6
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Suite, Apt. #, etc. Suite, Apt. #, etc.			03282005	Chg-P CR2	E034 (10/03)	
City & State City & State			4. FEI Num	-0498139	h	lied For
Zip Country	Zip Co	ountry		te of Status Desired	\$8.75 Addit	Applicable tional
S. Normand Address of Courant	Backboard Annat				Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent me			
TORRES, JUAN 1163 CHENTILE CIRCLE SI			Street Address (P.O. Box Number is Not Acceptable)			
WESTON, FL 333Z7			·			
WCS.CO. , FL 55524	•	<u> </u>				·
		City		. <u>.</u>	Zip Code	
The above named onlity submits this statement for the obligations or registered agent.	r the purpose of changing its regis	stered office or regis	tered agent, or t	ooth, in the State of Florida. I a	am familiar with, a	and accept
SIGNATURE Signature types or printed name of registered agent a	and title if applicable (NOTE: Recis	stered Agent signature requi	red when reinstaling)	DAT	F	
	7					
FILE NOWILL FEE IS \$ 50.00 After May 1, 2005	S. Election Campaign Fi Trust Fund Contribution	~ — *	5.00 May Be dded to Fees			
10. OFFICERS AND	DIRECTORS .	11.		S/CHANGES TO OFFICERS A	ND DIRECTORS	iN 11
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