

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037037

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: TAMPA INVESTMENT PARTNERS, L.L.C.

## Current Principal Place of Business:

7031 BENJAMIN ROAD, STE. G  
TAMPA, FL 33634

## New Principal Place of Business:

7031 BENJAMIN ROAD  
SUITE G  
TAMPA, FL 33634

## Current Mailing Address:

7031 BENJAMIN ROAD, STE. G  
TAMPA, FL 33634

## New Mailing Address:

7031 BENJAMIN ROAD  
SUITE G  
TAMPA, FL 33634

FEI Number: 51-0508791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TAMARGO, TED R  
FOWLER, WHITE, BOGGS BANKER P.A.  
501 E KENNEDY BLVD STE 1700  
TAMPA, FL 33602 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/MANAGERS:

Title: MGR ( ) Delete  
Name: HARB, BERSHARA  
Address: 7031 BENJAMIN ROAD SUITE G  
City-St-Zip: TAMPA, FL 33634

Title: MGR ( ) Delete  
Name: ISHAK, SALAM G  
Address: 5701 MARINER STREET SUITE 302  
City-St-Zip: TAMPA, FL 33609

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HARB, BERSHARA I  
Address: 7031 BENJAMIN ROAD SUITE G  
City-St-Zip: TAMPA, FL 33634

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BESHARA I. HARB

PRES

02/02/2009

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