

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000038465

FILED
Nov 13, 2008
Secretary of State**Entity Name:** TBS EXPRESS LLC**Current Principal Place of Business:**6511 NOVA DR
PMB 232
DAVIE, FL 333177401 US**New Principal Place of Business:****Current Mailing Address:**6511 NOVA DR
PMB 232
DAVIE, FL 333177401 US**New Mailing Address:****FEI Number:** 55-0867929**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JUMPING JAX TAX INC
1940 HARRISON ST
SUITE 306
HOLLYWOOD, FL 330205082 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:** MGRM () Delete
Name: WALLACE, SANDRA
Address: 6511 NOVA DR PMB 232
City-St-Zip: DAVIE, FL 333177401 US**Title:** MGR (X) Delete
Name: WALLACE, BASIL
Address: 6511 NOVA DR PMB 232
City-St-Zip: DAVIE, FL 333177401 US**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: WALLACE, BASIL
Address: 6511 NOVA DR PMB 232
City-St-Zip: DAVIE, FL 333177401 US**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: BASIL WALLACE

P

11/13/2008

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