

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041313

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: TRANSFLORIDA INVESTMENT, LLC

**Current Principal Place of Business:**

1375 GATEWAY BLVD  
STE 26  
BOYNTON BEACH, FL 33426 US

**New Principal Place of Business:**

1375 GATEWAY BLVD  
BOYNTON BEACH, FL 33426 US

**Current Mailing Address:**

PO BOX 6546  
DELRAY BEACH, FL 33482 US

**New Mailing Address:**

1375 GATEWAY BLVD  
BOYNTON BEACH, FL 33426 US

FEI Number: 20-1211543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GASSANT, LUNES  
564 NW 48TH AVE  
DELRAY BEACH, FL 33445 US

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

GASSANT, LUNES  
444 S CIRCLE DR  
BOYNTON BEACH, FL 33435 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: LUNES GASSANT

04/11/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GASSANT, LUNES MR  
Address: 564 NW 48TH AVE  
City-St-Zip: DELRAY BEACH, FL 33445 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GASSANT, LUNES MR  
Address: 444 S CIRCLE DR  
City-St-Zip: BOYNTON BEACH, FL 33435 US

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: LUNES GASSANT

MGR

04/11/2008

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