


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 11, 2007 8:00 am
Secretary of State

06-11-2007 90108 029 ****50.00

DOCUMENT # L04000043908					
1. Entity Name T-CHEM, LLC.					
Principal Place of Business 8401 LAGOS DE CAMPO BLDG V SUITE 308 TAMARAC, FL 33021			Mailing Address 8401 LAGOS DE CAMPO BLDG V SUITE 308 TAMARAC, FL 33021		
2. Principal Place of Business - No P.O. Box # 2269 NE 2nd Ave.		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Boca Raton FL		City & State		4. FEI Number 20-1232826	
Zip 33431		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FERNANDINI, CESAR 8401 LAGOS DE CAMPO BLDG V SUITE 308 TAMARAC, FL 33021			7. Name and Address of New Registered Agent Name <u>Fernandini Cesar.</u> Street Address (P.O. Box Number is Not Acceptable) <u>2269 NE 2nd Ave.</u> City <u>Boca Raton</u> FL Zip Code <u>33431</u>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by September 14, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FERNANDINI, CESAR 8401 LAGOS DE CAMPO BLDG V SUITE 308, FL 33021		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Fernandini Cesar. 2269 NE 2nd Ave. Boca Raton FL 33431	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CABALLERO, MARIA D 8401 LAGOS DE CAMPO BLDG V SUITE 308, FL 33021		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Caballero Maria D. 2269 NE 2nd Ave. Boca Raton FL 33431	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date <u>5/31/07.</u> Daytime Phone # _____		

50001712



05312007 Chg-LLC CR2E083 (12/06)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERNANDINI, CESAR
8401 LAGOS DE CAMPO
BLDG V SUITE 308
TAMARAC, FL 33021

Name Fernandini Cesar.
Street Address (P.O. Box Number is Not Acceptable)
2269 NE 2nd Ave.
City Boca Raton **FL** Zip Code 33431

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Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
FERNANDINI, CESAR
8401 LAGOS DE CAMPO
BLDG V SUITE 308, FL 33021

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
Fernandini Cesar.
2269 NE 2nd Ave.
Boca Raton FL 33431

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGR
CABALLERO, MARIA D
8401 LAGOS DE CAMPO
BLDG V SUITE 308, FL 33021

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGR
Caballero Maria D.
2269 NE 2nd Ave.
Boca Raton FL 33431

☒ Change ☐ Addition

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SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date 5/31/07. Daytime Phone # _____