

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048848

FILED
Apr 05, 2009
Secretary of State

Entity Name: TECHNICAL APPLIANCE GROUP LTD CO

Current Principal Place of Business:

5084 TRUTT CIRCLE
NORTH PORT, FL 34287

New Principal Place of Business:

5084 TROTT CIRCLE
UNIT 3
NORTH PORT, FL 34287

Current Mailing Address:

5638 LINGLE STREET
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 20-1307859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CECORA, EUGENE L
5638 LINGLE STREET
NORTH PORT, FL 34287 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: CECORA, EUGENE
Address: 5638 LINCLE STREET
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES:

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: EUGENE L CECORA

MGRM

04/05/2009

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