2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L04000071676

T&A GROUP, LLC



FILED Apr 02, 2007 08:00 AM Secretary of State

Principal Place of Business

Malling Address

1121 NW 141 AVENUE PEMBROKE PINES, FL 33028

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DO NOT WRITE IN THIS SPACE

03272007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1704449

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PEMBROKE PINES, FL 33028

CHEY, THOMAS 1121 NW 141 AVENUE PEMBROKE PINES, FL 33028

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chations of registered agent.	anging its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	lling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBERS/MANAGERS		
	MGRM		•
TITLE	1		
NAME	CHEY, THOMAS		
STREET ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES, FL 33028		
TITLE	MGRM		
NAME	CHEY, ADA		V00000683 9 01
STREET ADDRESS	1121 NW 141 AVENUE		84/06/07-80010-020 sa a

04/06/07-80010-020 50.0h

DO NOT WRITE

NAME STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME

11. I hereby certify that the information s	supplied with this filing does not qualify	for the exemptions contained in Chapter 1	19, Florida Statutes. I further certify that the information
			oath; that I am a managing member or manager of the
limited liability company or the recei	yer or trustee empowered to execute th	is report as required by Chapter 608, Flori	da Statutes.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGIN MEMBER, OR AUTHORIZED REPRESENTATIVE