2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073434

Name:

Address:

City-St-Zip:

TANNOUS, SUZIE E

20 DONDANVILLE RD., APT. 605

ST. AUGUSTINE, FL 32080 US

Entity Name: T&S INVESTMENTS, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3975 SOUTH ORANGE BLOSSOM TRAIL SUITE 101 ORLANDO, FL 32839 **New Mailing Address: Current Mailing Address:** 3975 SOUTH ORANGE BLOSSOM TRAIL SUITE 101 ORLANDO, FL 32839 US FEI Number: 20-1034131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STORMANT, CLARENCE R 20 DONDANVILLE RD. APT. 604 ST. AUGUSTINE, FL 32080 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete STORMANT, CLARENCE R Name: Name: Address: 20 DONDANVILLE RD., APT. 604 Address: City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: TANNOUS, FUAD E Name: Address: 20 DONDANVILLE RD., APT. 605 Address: City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition STORMANT, SANDRA P Name: Name: 20 DONDANVILLE RD., APT. 604 Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: FUAD TANNOUS MGR 04/30/2009