2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000004691

Entity Name: TROPICAL DELIGHT, LLC

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 290587 8905 OLD TEMPLE TERRACE HWY. TEMPLE TERRACE, FL 33687

APT. #2 TEMPLE TERRACE, FL 33637

Current Mailing Address: New Mailing Address:

P.O. BOX 290587 P.O. BOX 290587

TEMPLE TERRACE, FL 33687 TEMPLE TERRACE, FL 33687 US

FEI Number: 34-2032759 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:

DEJESUS, MIGUEL A DEJESUS, MIGUEL A 6210 SHERIDAN ROAD 8905 OLD TEMPLE TERRACE HWY. APT. 3110 APT. 2

TAMPA, FL 33635 US TAMPA, FL 33637 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: MIGUEL A. DEJESUS 01/30/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete MGRM Title: () Change () Addition

DEJESUS, MIGEUEL A Name: Name: Address: P.O. BOX 290587 Address: City-St-Zip: TEMPLE TERRACE, FL 33687 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: DEJESUS, GLEIRI Name: Address: P.O. BOX 290587 Address: TEMPLE TERRACE, FL 33687 City-St-Zip: 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: MIGUEL A. DEJESUS 01/30/2009