

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008670

Entity Name: T-BOX USA, LLC

FILED
Sep 23, 2009
Secretary of State

Current Principal Place of Business:

2028 NW 22ND AVE
MIAMI, FL 33142

New Principal Place of Business:

897 NW 167 AVE
PEMBROKE PINES, FL 33028

Current Mailing Address:

2028 NW 22ND AVE
MIAMI, FL 33142

New Mailing Address:

897 NW 167 AVE
PEMBROKE PINES, FL 33028

FEI Number: 20-5919153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DOGAN, CAHIT
2028 NW 22ND AVE
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

NATERA, ALEJANDRO
897 NW 167 AVE
PEMBROKE PINES, FL 33028 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: ALEJANDRO NATERA

09/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DOGAN, CAHIT
Address: 2028 NW 22ND AVE
City-St-Zip: MIAMI, FL 33142

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NATERA, ALEJANDRO
Address: 897 NW 167 AVE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Change (X) Addition
Name: GIMENEZ DE ZULOAGA, ANA
Address: 897 NW 167 AVE
City-St-Zip: PEMBROKE PINES, FL 33028

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: ALEJANDRO NATERA

MRGM

09/23/2009

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