

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013605

Entity Name: NEW TAMPA LLC

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

16222 VILLARREAL-DE-AVILA
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

16222 VILLARREAL-DE-AVILA
TAMPA, FL 33613

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAMAT, CHARUSHEELA
16222 VILLARREAL-DE-AVILA
TAMPA, FL 33613 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: KAMAT, CHARUSHEELA
Address: 16222 VILLARREAL-DE-AVILA
City-St-Zip: TAMPA, FL 33613

Title: MGRM () Delete
Name: KAMAT, SHRINATH S
Address: 16222 VILLARREAL-DE-AVILA
City-St-Zip: TAMPA, FL 33613

Title: MGRM () Delete
Name: KAMAT, AMIT
Address: 16222 VILLARREAL-DE-AVILA
City-St-Zip: TAMPA, FL 33613

Title: MGRM () Delete
Name: KAMAT, LEENA
Address: 16222 VILLARREAL-DE-AVILA
City-St-Zip: TAMPA, FL 33613

Title: MGRM () Delete
Name: KAMAT, DARSHAN
Address: 16222 VILLARREAL-DE-AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARUSHEELA KAMAT

MGRM

04/28/2008

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