

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040745

FILED
Jan 15, 2009
Secretary of State

Entity Name: TEC-WORKS ELECTRONIC ASSEMBLY, LLC

Current Principal Place of Business:

6713 ASHBURN ROAD
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

6713 ASHBURN ROAD
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 11-3748605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLMRDA, JOSEPH
6713 ASHBURN RD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

OLMEDA, GRISSELL
6713 ASHBURN RD
LAKE WORTH, FL 33467 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: GRISSELL OLMEDA

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OLMEDA, JOSEPH A
Address: 6713 ASHBURN ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR () Delete
Name: OLMEDA, GRISSELL
Address: 6713 ASHBURN ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: OLMEDA, JOSEPH A
Address: 6713 ASHBURN ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: OLMEDA, GRISSELL
Address: 6713 ASHBURN ROAD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OLMEDA, GRISSELL
Address: 6713 ASHBURN ROAD
City-St-Zip: LAKE WORTH, FL 33467

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: JOSEPH OLMEDA

M

01/15/2009

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