2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063869

Entity Name: THRUGRACE INTERNATIONAL ENTERPRISE, L.L.C.

FILED Apr 20, 2007 Secretary of State

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

17800 SW 83 AVENUE 9710 EAST INDIGO STREET

VILLAGE OF PALMETTO BAY, FL 33157 SUITE 202

VILLAGE OF PALMETTO BAY, FL 33157

Current Mailing Address: New Mailing Address:

17800 SW 83 AVENUE

VILLAGE OF PALMETTO BAY, FL 33157

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BATTS, CLAUDETTE O LAW OFFICE OF CLAUDETTE O. BATTS. P.A. 9710 EAST INDIGO STREET

17800 SW 83 AVENUE US

VILLAGE OF PALMETTO BAY, FL 33157 SUITE 202 VILLAGE OF PALMETTO BAY, FL 33157 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: CLAUDETTE O. BATTS, ESQ. 04/20/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition BATTS, CLAUDETTE BATTS, CLAUDETTE O ESQ. Name: Name: 17800 SW 83 AVENUE Address: 17800 SW 83 AVENUE Address:

City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157 City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157

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

BATTS, MICHAEL F Name: Name: Address: 17800 SW 83 AVENUE Address: City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33157 City-St-Zip:

Title: () Delete Title: MGR () Change (X) Addition

ADJEI, KWAKU Name: Name: Address: Address: 17168 SW 144 PLACE City-St-Zip: City-St-Zip: MIAMI, FL 33177

Title: () Delete Title: MGR () Change (X) Addition

Name: Name: ADJEI, BEATRICE Address: Address: 17168 SW 144 PLACE City-St-Zip: City-St-Zip: MIAMI, FL 33177

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAUDETTE O. BATTS **MGRM** 04/20/2007