

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096359

FILED
Mar 08, 2008
Secretary of State

Entity Name: TRI-ISLAND INVESTMENTS, LLC

Current Principal Place of Business:

425 SW 205 AVENUE
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

425 SW 205 AVENUE
PEMBROKE PINES, FL 33029 US

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:

FORRESTER, STANLEY
425 SW 205 AVENUE
PEMBROKE PINES, FL 33029 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: MGR () Delete
Name: FORRESTER, STANLEY
Address: 425 SW 205 AVE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGR () Delete
Name: FORRESTER, VIVIENNE
Address: 425 SW 205 AVE
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGR () Delete
Name: CROSS, DEBORAH
Address: 1114 BRIDGEWAY BLVD
City-St-Zip: ORLANDO, FL 32828 US

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:

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: STANLEY FORRESTER

MGR

03/08/2008

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