


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90318 004 \*\*\*\*50.00

<b>DOCUMENT # L05000099577</b>	
1. Entity Name TECHNOLOGY PARTNERS, LLC	

Principal Place of Business <del>6701 HANLEY ROAD</del> <b>500 N. WESTSHORE BLVD</b> TAMPA, FL 33634 <b>#405</b> <b>Tampa, FL 33607</b>	Mailing Address P.O. BOX 24282 TAMPA, FL 33623
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  AYLWARD, ROBERT E 600 S. MAGNOLIA AVE. SUITE 100 TAMPA, FL 33606	<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent.	cccept
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature)</small>	

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANCO, RAFAEL 4301 N. HABANA AVE #1 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EISNEROS, FRANK 4948 LYFORD CAY RD TAMPA, FL 33629 <b>CISNEROS, FRANK</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANEDO, MARIO <del>14001 ANCHORET RD</del> <b>4201 Bayshore Blvd</b> TAMPA, FL 33624 <b>#101</b> <b>Tampa, FL 33611</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEON, GUILLERMO 18605 AVENUE CAPRI LUTZ, FL 33558
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENENDEZ, LUIS <del>2613 N. DUNDEE ST</del> <b>2513 N. Dundee ST</b> TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEON, HERNAN <del>1290 GULF BLVD #1101</del> <b>4201 Bayshore Blvd</b> <del>CLEARWATER BEACH, FL 33767</del> <b>Tampa, FL 33611</b> <b>#1204</b>

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>

**60049018**



04102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3625013	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

Add

Jorge Inga  
6701 Hanley Rd.  
Tampa, FL 33629

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**4/6/07**

**813-2889360**

**X203**