

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115402

FILED  
May 19, 2007  
Secretary of State

**Entity Name:** TRAN PRE-CONSTRUCTION SERVICES, LLC

**Current Principal Place of Business:**

1000 NW 54 STREET  
MIAMI, FL 33127

**New Principal Place of Business:**

1000 NW 54 STREET  
SUITE TPC-1  
MIAMI, FL 331271820

**Current Mailing Address:**

1000 NW 54 STREET  
MIAMI, FL 33127

**New Mailing Address:**

1000 NW 54 STREET  
SUITE TPC-1  
MIAMI, FL 331271820

FEI Number: 76-0806012      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CLENDENEN, DAVID  
1000 NW 54 STREET  
MIAMI, FL 33127      US

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

CLENDENEN, DAVID  
1000 NW 54 STREET  
SUITE TPC-1  
MIAMI, FL 331271820      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:

05/19/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: CLENDENEN, DAVID  
Address: 1000 NW 54 ST  
City-St-Zip: MIAMI, FL 33127

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: CLENDENEN, DAVID  
Address: 1000 NW 54 ST, SUITE TPC-1  
City-St-Zip: MIAMI, FL 331271820

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: DAVID CLENDENEN

MGR

05/19/2007

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