FILED
Apr 15, 2008 08:00 AM
Secretary of State

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000024725

1. Entity Name
TBRP, LLC

Principal Place of Business	Mailing Address
201 SOUTH BISCAYNE BOULEVARD STE 850 MIAMI, FL 33131	201 SOUTH BISCAYNE BOULEVARD STE 850 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

03312008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-4453679
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSSZ FIU CORPORATION
201 SOUTH BISCAYNE BOULEVARD STE 850
MIAMI, FL 33131

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8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FERREE, CRAIG
STREET ADDRESS	201 SOUTH BISCAYNE BOULEVARD STE 850
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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04/28/08-80002-006 138.75

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: _____ 04.12.08 305.632.1776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #