2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049185

Entity Name: TIS INVESTMENTS LLC

FILED Apr 29, 2008 Secretary of State

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

1287 BEACON CIRCLE 7011 SW 10 COURT

WELLINGTON, FL 33414 PEMBROKE PINES, FL 33023

Current Mailing Address: New Mailing Address:

1287 BEACON CIRCLE 3712 ROYER LANE WELLINGTON, FL 33414 HAMPTON, GA 30228

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:

EVANS, NORINE 2324 S CONGRESS AVE., SUITE 2F PALM BEACH, FL 33406

MANAGING MEMBERS/MANAGERS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

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

SARDINE, TOMMY SARDINE, TOMMY Name: Name: 1287 BEACON CIRCLE Address: 3712 ROYER LANE Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: HAMPTON, GA 30228

Title: MGRM () Delete Title: MGRM (X) Change () Addition SARDINE, NATHANIEL Name: SARDINE, NATHANIEL Name:

Address: 1287 BEACON CIRCLE Address: 7011 SW 10 COURT City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: PEMBROKE PINES, GA 30228

Title: MGRM () Delete Title: MGRM (X) Change () Addition SARDINE, INGRID SARDINE, INGRID Name: Name:

Address: 1287 BEACON CIRCLE Address: 3712 ROYER LANE City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: HAMPTON, GA 30228

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

Name: SARDINE, DANIEL Name: SARDINE, DANIEL Address: 1287 BEACON CIRCLE Address: 3712 ROYER LANE City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: HAMPTON, GA 30228

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

SARDINE, JUSTIN Name: Name: 1095 ROWANSHYRE CIR Address: Address: City-St-Zip: City-St-Zip: MCDONOUGH, GA 30253

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: TOMMY SARDINE **MGRM** 04/29/2008