

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053907

Entity Name: TECHMONSTER LLC

FILED  
Apr 26, 2008  
Secretary of State

**Current Principal Place of Business:**

8834 N 56TH ST, SUITE B  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

8834 N 56TH ST, SUITE B  
TAMPA, FL 33617

**New Mailing Address:**

FEI Number: 20-4931806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, SCOTT A  
5814 N 17TH ST  
TAMPA, FL 33610 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: CTO ( ) Delete  
Name: DAVIS, SCOTT A  
Address: 5814 N 17TH ST  
City-St-Zip: TAMPA, FL 33610

Title: CAO ( ) Delete  
Name: HOWARD, KEVIN  
Address: 5814 N 17TH ST  
City-St-Zip: TAMPA, FL 33610

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CAO (X) Change ( ) Addition  
Name: HOWARD, KEVIN  
Address: 10620 CORY LAKE DR  
City-St-Zip: TAMPA, FL 33647

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: SCOTT DAVIS

CTO

04/26/2008

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