

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053907

Entity Name: TECHMONSTER LLC

FILED
May 05, 2009
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

8834 N 56TH ST
SUITE B
TAMPA, FL 33617

Current Mailing Address:

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

New Mailing Address:

8834 N 56TH ST
SUITE B
TAMPA, FL 33617

FEI Number: 20-4931806 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:

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: 10620 CORY LAKE DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES:

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

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

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

05/05/2009

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