

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000068762

FILED  
May 06, 2008  
Secretary of State

Entity Name: THOMAS INTERNATIONAL AMERICA, LLC

**Current Principal Place of Business:**

12555 ORANGE DRIVE  
SUITE 109  
DAVIE, FL 33330

**New Principal Place of Business:**

12555 ORANGE DRIVE  
SUITE 123  
DAVIE, FL 33330

**Current Mailing Address:**

12555 ORANGE DRIVE  
SUITE 109  
DAVIE, FL 33330

**New Mailing Address:**

12555 ORANGE DRIVE  
SUITE 123  
DAVIE, FL 33330

FEI Number: 20-5180319      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:**

SINGER, BERNARD A  
3107 STIRLING ROAD, SUITE 105  
FORT LAUDERDALE, FL 33312      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: MGRM ( ) Delete  
Name: THOMAS INTERNATIONAL, MANAGEMENT, I N C.  
Address: 12555 ORANGE DRIVE, SUITE 109  
City-St-Zip: DAVIE, FL 33330

Title: OFF ( ) Delete  
Name: ROBERT, GURE  
Address: 12555 ORANGE DRIVE, SUITE 109  
City-St-Zip: DAVIE, FL 33330

Title: MGRM ( ) Delete  
Name: RAYMOND REED EXECUTI, VE SERVICES, L T D.  
Address: HARRIS HOUSE, 27 WEST STREE  
City-St-Zip: MARLOW, BU SL72LS

**ADDITIONS/CHANGES:**

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

Title: OFF (X) Change ( ) Addition  
Name: AGUINALDO, DA SILVA  
Address: 12555 ORANGE DRIVE, SUITE 123  
City-St-Zip: DAVIE, FL 33330

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: AGUINALDO DA SILVA

OFF

05/06/2008

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