

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109744

FILED
Jan 14, 2008
Secretary of State

Entity Name: TK BUSINESS ENTERPRISES, LLC

Current Principal Place of Business:

1101 SHOMA DRIVE
WEST PALM BEACH, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

1101 SHOMA DRIVE
WEST PALM BEACH, FL 33414 US

New Mailing Address:

PO BOX 740211
BOYNTON BEACH, FL 33474 US

FEI Number: 20-5876643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONDER, TIM
1101 SHOMA DRIVE
WEST PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

CONDER, JAMES
1101 SHOMA DRIVE
WEST PALM BEACH, FL 33414 US

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: JAMES CONDER

01/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CONDER, TIM
Address: 1101 SHOMA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33414 US

Title: MGRM () Delete
Name: SNITKIN, KAREN
Address: 1101 SHOMA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33414 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CONDER, JAMES T PRES
Address: 1101 SHOMA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33414 US

Title: MGRM (X) Change () Addition
Name: SNITKIN, KAREN L VP
Address: 1101 SHOMA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33414 US

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: JAMES CONDER

PRES

01/14/2008

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