

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120638

FILED
Mar 26, 2008
Secretary of State

Entity Name: TAG INVESTMENT TEAM, LLC

Current Principal Place of Business:

426 SOUTH 26TH AVE
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

426 SOUTH 26TH AVE
HOLLYWOOD, FL 33020 US

New Mailing Address:

1300 ARTHUR ST
HOLLYWOOD, FL 33019 US

FEI Number: 20-8288710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAY PHILLIP PARKE, P.A.
1691 MICHIGAN AVENUE
SUITE 320
MIAMI BEACH, FL 33139 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: CONSTANTARAS, TANIJA
Address: 426 SOUTH 26TH AVE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGRM () Delete
Name: JARAMILLO, ALFONSO
Address: 6770 INDIAN CREEK, APT 9E
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: MGRM () Delete
Name: HENEGAN, GRANT
Address: 5535A NW 35TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33309 US

ADDITIONS/CHANGES:

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

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: TANIJA

MGM

03/26/2008

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