

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005561

FILED  
Jan 17, 2008  
Secretary of State

Entity Name: TK REAL ESTATE VENTURES LLC

## Current Principal Place of Business:

6434 EMERALD DUNES  
#303  
WEST PALM BEACH, FL 33411 US

## New Principal Place of Business:

28 ISLEWORTH DRIVE  
HENDERSON, NV 89052 US

## Current Mailing Address:

6434 EMERALD DUNES  
#303  
WEST PALM BEACH, FL 33411 US

## New Mailing Address:

28 ISLEWORTH DRIVE  
HENDERSON, NV 89052 US

FEI Number: 20-8246938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEREK A. SCHWARTZ, P.A.  
2385 EXECUTIVE CENTER DRIVE  
SUITE 190  
BOCA RATON, FL 33431 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: MGR ( ) Delete  
Name: REYNAUD, JOHN  
Address: 6434 EMERALD DUNES #303  
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGR ( ) Delete  
Name: GUIDOTTI, BOB  
Address: 28 ISLEWORTH DRIVE  
City-St-Zip: HENDERSON, NV 89052 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: REYNAUD, JOHN  
Address: 2618 COVE CAY DRIVE #1002  
City-St-Zip: CLEARWATER, FL 33760 US

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: ROBERT GUIDOTTI

MGR

01/17/2008

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