## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000012132

Entity Name: TIJUANA FLATS #1612 LLC

FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2699 LEE RD 1270 NORTH WICKHAM ROAD

SUITE 511 UNIT 2&3

WINTER PARK, FL 32789 US MELBOURNE, FL 32935 US

Current Mailing Address: New Mailing Address:

2699 LEE RD PO BOX 929

SUITE 511 OAKLAND, FL 34760 US WINTER PARK, FL 32789 US

FEI Number: 25-8445148 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPACE COAST FLATS OF FLORIDA, LLC
SPACE COAST FLATS OF FLORIDA, LLC

2699 LEE RD 300 TUBB STREET
SUITE 511 OAKLAND, FL 34760 US
WINTER PARK, FL 32789 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: 04/15/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: SPACE COAST FLATS OF, FLORIDA, LLC
Address: 2699 LEE RD SUITE 511 Address: PO BOX 929

City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: OAKLAND, FL 34760 US

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

Name:TS RESTAURANTS LLC,Name:Address:19 RICHMOND DRAddress:City-St-Zip:NEW SMYRNA BEACH, FL 32169 USCity-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: JAMES SHAVER MGR 04/15/2008