2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 28, 2008
Secretary of State

DOCUMENT# L07000025612

Entity Name: TAG TEAM PARTNERS, LLC

Current Principal Place of Business:

12555 ORANGE DRIVE, SUITE 109
DAVIE, FL 33330

New Principal Place of Business:

Current Mailing Address:

12555 ORANGE DRIVE, SUITE 109
DAVIE, FL 33330

New Mailing Address:

FEI Number: 20-8594964 **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:

KING, TERRI
7000 W. PALMETTO PARK ROAD
SUITE 502
BOCA RATON, FL 33433 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: MARKS, CRAIG
Address: PO BOX 268532
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete
Name: LBEJI, ONYEDIKACHI
Address: 2358 SW 135 AVE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MARKS, CRAIG
Address: 12555 ORANGE DRIVE, SUITE 109
City-St-Zip: DAVIE, FL 33330

Title: MGR (X) Change ( ) Addition
Name: IBEJI, ONYEDIKACHI
Address: 12555 ORANGE DRIVE, SUITE 109
City-St-Zip: DAVIE, FL 33330

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: CRAIG MARKS MGR 08/28/2008

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