

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055696

FILED  
May 03, 2010  
Secretary of State

Entity Name: TAX RETURN CENTER, LLC

**Current Principal Place of Business:**

13500 N. KENDALL DR. #129  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

13500 N. KENDALL DR. #129  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 52-2450161      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:**

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

BEOVIDES, MICHAEL  
13500 N. KENDALL DR. #129  
MIAMI, FL 33186    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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: BEOVIDES, MICHAEL  
Address: 13500 N. KENDALL DR. #129  
City-St-Zip: MIAMI, FL 33186

Title: MGR  
Name: BEOVIDES, PEGGY  
Address: 13500 N. KENDALL DR. #129  
City-St-Zip: MIAMI, FL 33186

I hereby 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: PEGGY BEOVIDES

MGR

05/03/2010

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