

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091155

Entity Name: TITI GIRL, LLC

FILED
Jul 15, 2008
Secretary of State

Current Principal Place of Business:

ROYAL PALM PLACE 398 VIA NARANJAS
#57
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

RONDELLI, PATRICIA C.
822 LAKE AVENUE NORTH
DELRAY BEACH, FL 33483 US

New Mailing Address:

RONDELLI, PATRICIA C.
255 HIGH POINT BLVD APT C
BOYNTON BEACH, FL 33435 US

FEI Number: 08-5420822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

RONDELLI, PATRICIA C
822 LAKE AVENUE NORTH
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

RONDELLI, PATRICIA C
255 HIGH POINT BLVD APT C
BOYNTON BEACH, FL 33435 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: PATRICIA C RONDELLI

07/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RONDELLI, PATRICIA C
Address: 822 LAKE AVENUE NORTH
City-St-Zip: DELRAY BEACH, FL 33483 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RONDELLI, PATRICIA C
Address: 255 HIGH POINT BLVD APT C
City-St-Zip: BOYNTON BEACH, FL 33435 US

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: PATRICIA C RONDELLI

MGR

07/15/2008

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