

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117732

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: TATRA, LLC

## Current Principal Place of Business:

1535 N. COGSWELL  
SUITE C-19  
ROCKLEDGE, FL 32955 US

## New Principal Place of Business:

521B N. HARBOR CITY BLVD  
MELBOURNE, FL 32935 US

## Current Mailing Address:

P.O BOX 33155  
INDIALANTIC, FL 32903 US

## New Mailing Address:

FEI Number: 26-1463529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCKUNE, VICTORIA  
1535 N. COGSWELL  
ROCKLEDGE, FL 32955 US

## Name and Address of New Registered Agent:

MCKUNE, VICTORIA  
521B N. HARBOR CITY BLVD.  
MELBOURNE, FL 32935 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:

04/29/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MCKUNE, VICTORIA  
Address: P.O. BOX 33155  
City-St-Zip: INDIALANTIC, FL 32903

Title: MGRM ( ) Delete  
Name: BEREGLI, YVAN  
Address: P.O. BOX 33155  
City-St-Zip: INDIALANTIC, FL 32903

Title: MGRM ( ) Delete  
Name: MCKUNE, JAMES  
Address: P.O. BOX 411784  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM ( ) Delete  
Name: MCKUNE, MONICA  
Address: P.O. BOX 411784  
City-St-Zip: MELBOURNE, FL 32941

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: YVAN BEREGLI

MGRM

04/29/2008

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