

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000126454

FILED
Apr 30, 2009
Secretary of State

Entity Name: TAX INTERNATIONAL LLC

Current Principal Place of Business:

3501 N. PONCE DR LEON BLVD. UNIT 368
ST.AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

3501 N. PONCE DR LEON BLVD. UNIT 368
ST.AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 26-1593854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, BRYAN J
3501 N. PONCE DR LEON BLVD. UNIT 368
ST.AUGUSTINE, FL 32084 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: JONES, BRYAN J
Address: 3501 N. PONCE DR LEON BLVD. UNIT 368
City-St-Zip: ST.AUGUSTINE, FL 32084

Title: MGRM () Delete
Name: HOWARD, SANDRA
Address: 2301 CASABLANCA COURT
City-St-Zip: MIDDLEBURG, FL 32068

Title: MGRM () Delete
Name: BRYAN, XAVIER
Address: 829 HOLBROOKE DRIVE
City-St-Zip: NEWPORT NEWS, VA 23602

Title: MGRM () Delete
Name: JENKINS, DEON
Address: 13000 S. TRYON ST. STE F#110
City-St-Zip: CHARLOTTE, NC 282787602

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: MGRM () Change (X) Addition
Name: JONES, JOANN
Address: 115 LEGENDARY DR
City-St-Zip: ST.AUGUSTINE, FL 32092

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: BRYAN JONES

MGR

04/30/2009

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