2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000064737

City-St-Zip:

Entity Name: TOTAL BUSINESS GROUP LLC

FILED Mar 26, 2009 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | | |
|-----------------------------------------------|-------------------------------------------------------|----------------------------|------------|---------------------------------------------|-------------|--------------------------------------------------------|--|--|
| 1112 WES SUITE 104 WESTON, | | | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | | |
| 1112 WES SUITE 104 WESTON, | Ļ | | | | | | | |
| FEI Number: | 26-2971337 | FEI Number Applied For () | FEI Num | ber Not Appl | icable () | Certificate of Status Desired (X) | | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | | | |
| The above | FL 33326 Us named entity e of Florida. | | purpose of | ^r changing i | ts register | red office or registered agent, or both | | |
| Electronic Signature of Registered Agent | | | | Date | | | | |
| MANAGING MEMBERS/MANAGERS: | | | | ADDITIONS/CHANGES: | | | | |
| Title: Name: Address: City-St-Zip: | MGR (TOVAR, RAFAI 6670 NW. 114 DORAL, FL 33 | AVE. APT 605 | | Title: Name: Address: City-St-Zip: | | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | MGR (LEON, JOSE B 16171 BLATT I WESTON, FL | BLVD. APT 109 | | Title: Name: Address: City-St-Zip: | | () Change () Addition | | |
| Title: Name: Address: | (|) Delete | | Title: Name: Address: | | () Change (X) Addition), JOSE R 77 AVE APT 305 | | |

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.

MIAMI, FL 33166

City-St-Zip:

SIGNATURE: JOSE B LEON MGR 03/26/2009