

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000091907

FILED  
Apr 25, 2009  
Secretary of State

Entity Name: T-STATION, LLC.

**Current Principal Place of Business:**

710 6TH STREET  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

710 6TH STREET  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 26-3439525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PETERS, PATRICK J  
4041 COLLINS AVENUE  
418  
MIAMI BEACH, FL 33139 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: PETERS, PATRICK J  
Address: 4041 COLLINS AVENUE # 418  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete  
Name: PETERS, PEARL T  
Address: 1030 6TH STREET # 2  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM (X) Delete  
Name: PETERS, DAVID A  
Address: 4041 COLLINS AVENUE # 418  
City-St-Zip: MIAMI BEACH, FL 33139

**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:

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: PATRICK PETERS

MGR

04/25/2009

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