

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113165

FILED
May 03, 2009
Secretary of State

Entity Name: TROPICAL TRADEWINDS, L.L.C.

Current Principal Place of Business:

2320 N.W. 95TH TERRACE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2320 N.W. 95TH TERRACE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 26-3869903 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

COHEN, JEREMY A ESQ.
C/O COHEN & OWENS, P.A.
3801 HOLLYWOOD BLVD., SUITE 200
HOLLYWOOD, FL 33021 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROSADO, ROBERT
Address: 2320 N.W. 95TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR () Delete
Name: ROSADO, ELSA
Address: 2320 N.W. 95TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

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: ROBERT ROSADO

MGR

05/03/2009

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