

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000013467

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** T.C.B. HOME & OFFICE IMPROVEMENT, LLC

**Current Principal Place of Business:**

11212 S.W. 129 PLACE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

11212 S.W. 129 PLACE  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 30-0531890

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SARDINAS, CARLOS  
11212 S.W. 129 PLACE  
MIAMI, FL 33186 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  
Name: SARDINAS, CARLOS  
Address: 11212 S.W. 129 PLACE  
City-St-Zip: MIAMI, FL 33186

I hereby 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: CARLOS SARDINAS

MGR

01/11/2011

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