

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000005262

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** TS HOME THEATER PLUS LLC

**Current Principal Place of Business:**

12111 FERN BLOSSOM DR  
GIBSONTON, FL 33534 US

**New Principal Place of Business:**

908 E 23 AVE  
TAMPA, FL 33605 US

**Current Mailing Address:**

12111 FERN BLOSSOM DR  
GIBSONTON, FL 33534

**New Mailing Address:**

908 E 23 AVE  
TAMPA, FL 33605 US

**FEI Number:** 27-1602430

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, TARVI R CEO  
12111 FERN BLOSSOM DR  
GIBSONTON, FL 33534 US

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

SMITH, TARVI R CEO  
908 E 23 AVE  
TAMPA, FL 33605 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:** TARVI SMITH

02/23/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SMITH, TARVI R MGRM  
**Address:** 908 E 23 AVE  
**City-St-Zip:** TAMPA, FL 33605 US

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:** TARVI SMITH

CEO

02/23/2011

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