2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102232

Entity Name: TSL DEVELOPERS INCORPORATED

FILED Jun 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11950 WEST DIXIE HWY 1273 NE 92 STREET MIAMI, FL 33161 MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

11950 WEST DIXIE HWY 1273 NE 92 STREET MIAMI, FL 33161 MIAMI, FL 33138

FEI Number: 20-1345945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ESTIME-THOMPSON, P.A.

11950 WEST DIXIE HWY, SUITE ONE
MIAMI, FL 33161 US

THOMPSON, RUBEN T
1273 NE 92 STREET
MIAMI, FL 33138 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: RUBEN T. THOMPSON 06/11/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change

 Name:
 THOMPSON, RUBEN
 Name:
 THOMPSON, RUBEN T

 Address:
 11950 W. DIXIE HWY
 Address:
 1273 NE 92 STREET

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33138

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 THOMPSON, RUBEN T
 Name:
 THOMPSON, RÜBEN T

 Address:
 11950 W DIXIE HWY
 Address:
 1273 NE 92 STREET

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33138

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 THOMPSON, RUBEN T
 Name:
 THOMPSON, RUBEN

 Address:
 11950 W. DIXIE HWY
 Address:
 1273 NE 92 STREET

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33138

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUBEN T. THOMPSON P 06/11/2008