

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000085823

FILED  
Jun 11, 2010  
Secretary of State

**Entity Name:** ALL AMERICAN EMPLOYER SERVICES LLC

**Current Principal Place of Business:**

809 BEVERLY PKWY  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

809 BEVERLY PKWY  
PENSACOLA, FL 32505

**New Mailing Address:**

FEI Number: 27-0670619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLORES, RAYMOND G  
809 BEVERLY PKWY  
PENSACOLA, FL 32505 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: MGRM  
Name: FLORES, RAYMOND G  
Address: 809 BEVERLY PKWY  
City-St-Zip: PENSACOLA, FL 32505

Title: MGRM  
Name: SMITH, GREGORY A  
Address: 809 BEVERLY PKWY  
City-St-Zip: PENSACOLA, FL 32505

Title: MGRM  
Name: COSCI, MATTHEW A  
Address: 809 BEVERLY PKWY  
City-St-Zip: PENSACOLA, FL 32505

Title: MGR  
Name: MATHIS INSURANCE & INVESTMENTS INC  
Address: 809 BEVERLY PKWY  
City-St-Zip: PENSACOLA, FL 32505

Title: MGR  
Name: PAYROLL SERVICES INC  
Address: PAYROLL SERVICES INC  
City-St-Zip: PENSACOLA, FL 32505

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: RAYMOND G. FLORES

MGRM

06/11/2010

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