

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059931

FILED  
May 03, 2005  
Secretary of State

Entity Name: E.S.L. CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

791 CRANDON BOULEVARD APT 1402  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

1101 BRICKELL AVENUE  
STE. N800  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-1608680      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:**

CANO, LUIS A  
791 CRANDON BOULEVARD APT 1402  
KEY BISCAYNE, FL 33149      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/MEMBERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: CANO, LUIS A  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: TRUJILLO, MARIA P  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: CANO, SAMUEL  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: CANO, EDUARDO  
Address: 791 CRANDON BOULEVARD APT 1402  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS A CANO

MGRM

05/03/2005

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