

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074827

FILED
Apr 24, 2007
Secretary of State

Entity Name: BUSINESS CRITICAL SYSTEMS, LLC

Current Principal Place of Business:

12555 BISCAYNE BLVD., STE. 901
NORTH MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

12555 BISCAYNE BLVD., STE. 901
NORTH MIAMI, FL 33181

New Mailing Address:

FEI Number: 20-5296336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, MARK A ESQ.
200 EAST LAS OLAS BLVD., 19TH FLOOR
FORT LAUDERDALE, FL 33301 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 () Delete
Name: BIZNESHOSTING INC.,
Address: 1914 NW 137 TERRACE
City-St-Zip: PEMRBOKE PINES, FL 33028

Title: MGRM () Delete
Name: MARGATE.NET, INC.,
Address: 6411 NW 41 STREET
City-St-Zip: CORAL SPRINGS, FL 33067

Title: MGRM () Delete
Name: ADVANCED TECHNOLOGIE, S CONSULTING G R OUP INC
Address: 12555 BISCAYNE BLVD., STE. 901
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES:

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

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

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

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 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: SHAWN M. WILLIAMS

MGR

04/24/2007

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