

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000076494

**FILED**  
**Jan 14, 2012**  
**Secretary of State**

**Entity Name:** TRIOPS SOLUTIONS LLC

**Current Principal Place of Business:**

4299 NW 36TH ST  
SUITE 874  
MIAMI SPRINGS, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

2800 GLADES CIRCLE  
SUITE 118  
WESTON, FL 33327

**New Mailing Address:**

**FEI Number:** 27-3219537

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANECA LLC  
4299 NW 36TH ST  
SUITE 263  
MIAMI, FL 33166 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:** ANECA LLC  
**Address:** 4299 NW 36TH ST  
**City-St-Zip:** MIAMI, FL 33166

**Title:** MGRM  
**Name:** ZARIKIAN, ESTEBAN G  
**Address:** 205 EAST 63RD ST., APT 3C  
**City-St-Zip:** NEW YORK, NY 10065 US

**Title:** MGRM  
**Name:** VOLLBRACHT, CARLOS A  
**Address:** 205 EAST 63RD ST., APT 3C  
**City-St-Zip:** NEW YORK, NY 10065 US

**Title:** MRGM  
**Name:** CAIAZZO, JOSE V  
**Address:** 205 EAST 63RD ST., APT 3C  
**City-St-Zip:** NEW YORK, NY 10065 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:** ENRIQUE J AGUERREVERE

MGRM

01/14/2012

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