

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000044304

**Entity Name:** INTEK SOLUTIONS LLC

**Current Principal Place of Business:**

2332 GALIANO STREET, 2ND FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

P.O. BOX 14-0970  
CORAL GABLES, FL 33114

**FEI Number:** 45-1627895

**Certificate of Status Desired:** No

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

A&G BUSINESS SERVICES INC.  
5805 BLUE LAGOON DR  
SUITE 200  
MIAMI , FL 33126 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:** MARIA PILAR ALONSO

02/25/2013

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MD  
Name MOMPO, JORGE C  
Address 2332 GALIANO STREET, 2ND FLOOR  
City-State-Zip: CORAL GABLES FL 33134

*I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JORGE C MOMPO

MD

02/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date