

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016644

Entity Name: RED STONE SOLUTIONS, LLC

FILED
Jan 07, 2004
Secretary of State

Current Principal Place of Business:

3038 NORTH FEDERAL HIGHWAY
SUITE D-200
FT. LAUDERDALE, FL 33306 US

New Principal Place of Business:

Current Mailing Address:

3038 NORTH FEDERAL HIGHWAY
SUITE D-200
FT. LAUDERDALE, FL 33306 US

New Mailing Address:

FEI Number: 54-2062986 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PISONI, MATTHEW
3038 NORTH FEDERAL HIGHWAY
SUITE D-200
FT. LAUDERDALE, FL 33306 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/MEMBERS:

Title: MGR () Delete
Name: PISONI, MATTHEW
Address: 3038 NORTH FEDERAL HIGHWAY
City-St-Zip: FT. LAUDERDALE, FL 33306 US

Title: MGR () Delete
Name: FRIEDBERG, SHELLEY
Address: 3038 NORTH FEDERAL HIGHWAY
City-St-Zip: FT. LAUDERDALE, FL 33306 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PISONI, MATTHEW
Address: 3038 NORTH FEDERAL HIGHWAY, SUITE D-200
City-St-Zip: FT. LAUDERDALE, FL 33306 US

Title: MGR (X) Change () Addition
Name: FRIEDBERG, SHELLEY
Address: 3038 NORTH FEDERAL HIGHWAY, SUITE D-200
City-St-Zip: FT. LAUDERDALE, FL 33306 US

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: MATTHEW PISONI

MGR

01/07/2004

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