

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024992

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: CERTIFIED ACCOUNTANTS USA, LLC.

## Current Principal Place of Business:

5620 N.W 61ST STREET  
#1214  
COCONUT CREEK, FL 33073 US

## Current Mailing Address:

5620 N.W 61ST STREET  
#1214  
COCONUT CREEK, FL 33073 US

## New Principal Place of Business:

6574 N. STATE ROAD 7  
251  
COCONUT CREEK, FL 33073 US

## New Mailing Address:

6574 N. STATE ROAD 7  
251  
COCONUT CREEK, FL 33073 US

FEI Number: 57-1136063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABUELHOMMOS, AHMAD M MR.  
5620 N.W 61ST STREET  
#1214  
COCONUT CREEK, FL 33073 US

## Name and Address of New Registered Agent:

ABUELHOMMOS, AHMAD M MR.  
6574 N. STATE ROAD 7  
251  
COCONUT CREEK, FL 33073 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: AHMAD ABUELHOMMOS

04/27/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ABUELHOMMOS, AHMAD  
Address: 5620 NW 61ST ST #1214  
City-St-Zip: COCONUT CREEK, FL 33073

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ABUELHOMMOS, AHMAD  
Address: 6574 N. STATE ROAD 7 #251  
City-St-Zip: COCONUT CREEK, FL 33073

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: AHMAD ABUELHOMMOS

P

04/27/2007

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