2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010694

Entity Name: INTERNET SOLUTIONS PLUS, LLC

FILED Feb 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19201 COLLINS AVE STE 244 1970 NE 149 ST.

SUNNY ISLES, FL 33160 US NORTH MIAMI, FL 33181 US

Current Mailing Address: New Mailing Address:

19201 COLLINS AVE STE 244 1970 NE 149 ST.

SUNNY ISLES, FL 33160 US NORTH MIAMI, FL 33181 US

FEI Number: 30-0177714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VERNITSKIY, DEMITRIY

16711 COLLINS AVE

LASTER, REALITY

1970 NE 149 ST.

SUNNY ISLES, FL 33160 US NORTH MIAMI, FL 33181 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: REALITY LASTER 02/19/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 ALVARADO, GREGORIA
 Name:
 POPELIK, ASHLEY

 Address:
 10 SW SOUTH RIVER DR #1109
 Address:
 1970 NE 149 ST.

City-St-Zip: MIAMI, FL 33130 US City-St-Zip: NORTH MIAMI, FL 33181 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: LASTER, REALITY Name: LASTER, REALITY

Address: 10 SW SOUTH RIVER DR #1109 Address: 1970 NE 149 ST.

City-St-Zip: MIAMI, FL 33130 US City-St-Zip: NORTH MIAMI, FL 33181 US

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 CARRRINGTON, SABAEA
 Name:

 Address:
 19201 COLLINS AVE STE 244
 Address:

 City-St-Zip:
 SUNNY ISLES, FL 33160
 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: REALITY LASTER MGR 02/19/2008