

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000014466

**FILED**  
**Apr 17, 2010**  
**Secretary of State**

**Entity Name:** RESULTS CUSTOMER SOLUTIONS, LLC

**Current Principal Place of Business:**

499 SHERIDAN STREET  
4TH FLOOR  
DANIA, FL 33004

**New Principal Place of Business:**

**Current Mailing Address:**

499 SHERIDAN STREET  
4TH FLOOR  
DANIA, FL 33004

**New Mailing Address:**

**FEI Number:** 02-0690151

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ROBERT M. MAYER & ASSOCIATES, INC.  
1320 S. DIXIE HWY., STE. 811  
CORAL GABLES, FL 33146 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:** MGR  
**Name:** RAPP, ROBERT  
**Address:** 499 E SHERIDAN ST, 4TH FLOOR  
**City-St-Zip:** DANIA, FL 33004

**Title:** MGR  
**Name:** MATERA, EDWARD  
**Address:** 499 E SHERIDAN ST, 4TH FLOOR  
**City-St-Zip:** DANIA, FL 33004

**Title:** MGRM  
**Name:** RESULTS TECHNOLOGIES INC.  
**Address:** 499 SHERIDAN STREET # 400  
**City-St-Zip:** DANIA, FL 33004

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:** EDWARD MATERA

MGR

04/17/2010

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