

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030333

FILED
May 02, 2007
Secretary of State

Entity Name: RESULTS PLUS, LLC

Current Principal Place of Business:

499 SHERIDAN ST
SUITE 400
DANIA, FL 33004

New Principal Place of Business:

Current Mailing Address:

499 SHERIDAN ST
SUITE 400
DANIA, FL 33004

New Mailing Address:

FEI Number: 35-2213281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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: MGRM () Delete
Name: RESULTS TECHNOLOGIES, , INC.
Address: 499 E SHERIDAN ST, SUITE 400
City-St-Zip: DANIA, FL 33004

Title: MGRM () Delete
Name: J.R. THOMAS & ASSOCI, ATES, LLC
Address: 499 E SHERIDAN ST, SUITE 400
City-St-Zip: DANIA, FL 33004

Title: MGR () Delete
Name: THOMAS, JOSEPH
Address: 499 E SHERIDAN ST, SUITE 400
City-St-Zip: DANIA, FL 33004

Title: MGR () Delete
Name: RAPP, ROBERT
Address: 499 E SHERIDAN ST, SUITE 400
City-St-Zip: DANIA, FL 33004

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ROBERT RAPP

MGR

05/02/2007

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