

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032894

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** BOST BUSINESS SOLUTIONS, LLC

**Current Principal Place of Business:**

P. O. BOX 46487  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 46487  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 83-0368231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEINBERG, STEVEN H  
17736 OAK BRIDGE STREET  
TAMPA, FL 33647 US

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

STEINBERG, STEVEN H  
27140 RAVEN BROOK ROAD  
WESLEY CHAPEL, FL 33544 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:**

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** STEINBERG, STEVEN H  
**Address:** 17736 OAK BRIDGE STREET  
**City-St-Zip:** TAMPA, FL 33647

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** STEINBERG, STEVEN H  
**Address:** 27140 RAVEN BROOK ROAD  
**City-St-Zip:** WESLEY CHAPEL, FL 33544

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:** STEVEN STEINBERG

MGRM

04/29/2009

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