

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001581

FILED
Jan 06, 2005
Secretary of State

Entity Name: INTERNET MARKETING & CONSULTING SOLUTIONS, LLC

Current Principal Place of Business:

8405 N. HIMES AVE., STE. 219
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

8405 N. HIMES AVE., STE. 219
TAMPA, FL 33614

New Mailing Address:

FEI Number: 20-0456288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OKEKE, IKE C
8405 N. HIMES AVE., STE. 219
TAMPA, FL 33614 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/MEMBERS:

Title: MGRM () Delete
Name: OKEKE, IKE C
Address: 8405 N. HIMES AVE., STE. 219
City-St-Zip: TAMPA, FL 33614

Title: MGRM () Delete
Name: OBI-ANADIUME, VICTOR
Address: 6567 SPANISH MOSS CIRCLE
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ANADIUME, VICTOR
Address: 8405 N. HIMES AVENUE
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VA

MGR

01/06/2005

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