

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016581

**FILED**  
**Mar 26, 2009**  
**Secretary of State**

**Entity Name:** ADAMO REALTY NETWORK, LLC

**Current Principal Place of Business:**

100 NE 84ST STREET  
SUITE 150  
MIAMI, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 530746  
MIAMI, FL 331530746 US

**New Mailing Address:**

**FEI Number:** 61-1474839

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

M-CAR CONSULTANTS & ASSOCIATES, INC.  
100 NE 84ST STREET  
SUITE 150  
MIAMI, FL 33138 US

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

ADAMO COMMUNITY SOLUTIONS, INC.  
290 NE 89TH STREET  
EL PORTAL, FL 33138 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: ADAMO COMMUNITY SOLUTIONS, INC.

03/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: M-CAR CONSULTANTS &, ASSOCIATES, IN C .  
Address: 100 NE 84TH ST SUITE 150  
City-St-Zip: MIAMI, FL 33138 US

Title: MGRM ( ) Delete  
Name: ALFAU-COMPAS, ESTER M MGRM  
Address: 290 NE 89TH STREET  
City-St-Zip: EL PORTAL, FL 33138

Title: MGRM ( ) Delete  
Name: COMPAS, STEPHEN J MGRM  
Address: 290 NE 89TH STREET  
City-St-Zip: EL PORTAL, FL 33138

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ADAMO COMMUNITY SOLU, TIONS, INC.  
Address: 290 NE 89TH STREET  
City-St-Zip: EL PORTAL, FL 33138 US

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: STEPHEN J. COMPAS

MGRM

03/26/2009

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