

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029502

FILED
May 01, 2006
Secretary of State

Entity Name: THE PERFECT SOLUTION L.L.C.

Current Principal Place of Business:

7005 GLEN EAGLE DRIVE
MIAMI LAKES, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

7005 GLEN EAGLE DRIVE
MIAMI LAKES, FL 33014 US

New Mailing Address:

FEI Number: 20-1061816 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:

GONZALEZ, LIZET B MANAGER
7005 GLEN EAGLE DRIVE
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

GONZALEZ, LUIS E MANAGER
7005 GLEN EAGLE DRIVE
MIAMI LAKES, FL 33014 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: LUIS GONZALEZ

05/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR (X) Delete
Name: GONZALEZ, LIZET B
Address: 7005 GLEN EAGLE DR.
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: MGR () Delete
Name: GONZALEZ, LUIS E JR
Address: 7005 GLEN EAGLE DRIVE
City-St-Zip: MIAMI LAKES, FL 33014 US

ADDITIONS/CHANGES:

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 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: LUIS GONZALEZ

MGR

05/01/2006

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