

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033600

Entity Name: WIMESH SOLUTIONS LLC

FILED  
Feb 08, 2009  
Secretary of State

**Current Principal Place of Business:**

4412 NW 97TH CT  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

4412 NW 97TH CT  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 73-1703341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MURAI WALD BIONDO MORENO & BROCHIN, P.A.  
TWO ALHAMBRA PLAZA  
PENTHOUSE 1B  
MIAMI, FL 33134 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: GONZALEZ, HUMBERTO  
Address: TWO ALHAMBRA PLAZA, PH 1B  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: GONZALEZ, MARIA  
Address: TWO ALHAMBRA PLAZA, PH 1B  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: AGUERREVERE, DANIEL  
Address: 4412 NW 97TH CT  
City-St-Zip: DORAL, FL 33178

Title: MGRM (X) Change ( ) Addition  
Name: AGUERREVERE, GONZALO  
Address: 4412 NW 97TH CT  
City-St-Zip: DORAL, FL 33178

Title: MGRM ( ) Change (X) Addition  
Name: AGUERREVERE, JUAN  
Address: 4412 NW 97TH CT  
City-St-Zip: DORAL, FL 33178

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: DANIEL AGUERREVERE

MGRM

02/08/2009

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