

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040886

FILED  
Sep 04, 2007  
Secretary of State

Entity Name: NSOLO CONSULTING GROUP L.L.C.

## Current Principal Place of Business:

1242 ALTON ROAD  
204  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

3400 NE 192ND STREET  
210  
AVENTURA, FL 33180

## Current Mailing Address:

1242 ALTON ROAD  
204  
MIAMI BEACH, FL 33139

## New Mailing Address:

3400 NE 192ND STREET  
210  
AVENTURA, FL 33180

FEI Number: 02-1264534      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:

NANAVICHIT, NICK  
1242 ALTON ROAD  
204  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

NANAVICHIT, NICK  
3400 NE 192ND STREET  
210  
AVENTURA, FL 33180 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:

09/04/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: NANAVICHIT, NICK  
Address: 1242 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: NANAVICHIT, NICK  
Address: 3400 NE 192ND STREET STE #210  
City-St-Zip: AVENTURA, FL 33180

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: NICK NANAVICHIT

MGRM

09/04/2007

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