

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049895

FILED
May 05, 2008
Secretary of State

Entity Name: SEARCH I.T. L.L.C.

Current Principal Place of Business:

10222 MERRIMAC MANOR DRIVE
BRANDON, FL 33569

New Principal Place of Business:

Current Mailing Address:

10015 PARLEY DRIVE
TAMPA, FL 33626

New Mailing Address:

FEI Number: 68-0588810 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:

CARLSON, KIMBERLY D
10015 PARLEY DRIVE
TAMPA, FL 33626 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: MGR () Delete
Name: SEARCH I.T. INC.,
Address: 10222 MERRIMAC MANOR DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR () Delete
Name: INNOVATIVE RESELLER, SOLUTIONS INC.
Address: 10015 PARLEY DRIVE
City-St-Zip: TAMPA, FL 33626

Title: MGRM () Delete
Name: MIGLIARESE, JILL
Address: 10222 MERRIMAC MANOR DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM () Delete
Name: CARLSON, KIMBERLY D
Address: 10015 PARLEY DRIVE
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

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

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

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: KIMBERLY CARLSON

MM

05/05/2008

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