

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056952

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: EBUSINESS SOLUTIONS, LLC

## Current Principal Place of Business:

9369 SHERIDAN ST.  
SUITE 701  
COOPER CITY, FL 33024

## New Principal Place of Business:

## Current Mailing Address:

9369 SHERIDAN ST.  
SUITE 701  
COOPER CITY, FL 33024

## New Mailing Address:

FEI Number: 16-1705545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHESNEY, SHAWN  
9369 SHERIDAN ST.  
SUITE 701  
COOPER CITY, FL 33024 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: CHESNEY, SHAWN  
Address: 9369 SHERIDAN STREET, SUITE 701  
City-St-Zip: COOPER CITY, FL 33024

Title: MGR ( ) Delete  
Name: CHESNEY, MILA  
Address: 9369 SHERIDAN STREET, SUITE 701  
City-St-Zip: COOPER CITY, FL 33024

## 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 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: SHAWN CHESNEY

MGR

04/29/2008

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