

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000074095

Entity Name: EMAX SOLUTIONS, LLC

FILED
May 03, 2007
Secretary of State

Current Principal Place of Business:

3644 SW 57TH AVE.
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

3644 SW 57TH AVE.
MIAMI, FL 33155

New Mailing Address:

FEI Number: 20-1757888 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:

CACCHIONE, MAXIME
3644 SW 57TH AVE
MIAMI, FL 33155 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: CACCHIONE, MAXIME
Address: 3644 SW 57TH AVE
City-St-Zip: MIAMI, FL 33155

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

ADDITIONS/CHANGES:

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

Title: M () Change (X) Addition
Name: ELEONORA, ROVERSI
Address: 3644 SW 57TH AVE
City-St-Zip: MIAMI, FL 33155

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: MAXIME CACCHIONE

MGRM

05/03/2007

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