

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000077052

**FILED**  
**Apr 19, 2005**  
**Secretary of State**

**Entity Name:** AMERICAN ACCOUNTING SOLUTIONS, LLC

**Current Principal Place of Business:**

3618 WEST FLAGLER  
5  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

3618 WEST FLAGLER  
5  
MIAMI, FL 33135

**New Mailing Address:**

**FEI Number:** 20-1846633      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RODRIGUEZ, HAYDEE  
3618 WEST FLAGLER  
5  
MIAMI, FL 33135 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: RODRIGUEZ, HAYDEE  
Address: 13767 SW 157 TERRACE  
City-St-Zip: MIAMI, FL 33177

Title: MGRM ( ) Delete  
Name: MEDINA, PATRICIA  
Address: 310 NW 132 CT  
City-St-Zip: MIAMI, FL 33182

**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 for the exemption stated in Section 119.07(3)(i), 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: HAYDEE RODRIGUEZ

MGRM

04/19/2005

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