

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007153

FILED
Feb 12, 2009
Secretary of State

Entity Name: A ONE BIZ SOLUTIONS, LLC

Current Principal Place of Business:

17397 SW 36TH ST.
MIRAMAR, FL 33029

New Principal Place of Business:

Current Mailing Address:

17397 SW 36TH ST.
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: 20-2242526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAFNA, GITIKA
17397 SW 36TH ST.
MIRAMAR, FL 33029 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: BAFNA, GITIKA
Address: 17397 SW 36TH ST.
City-St-Zip: MIRAMAR, FL 33029

Title: MGRM () Delete
Name: JAIN, MANISH
Address: 1221 BETTY DRIVE
City-St-Zip: RACELAND, KY 41169

Title: MGRM () Delete
Name: JAIN, KIRTI
Address: 243 BELLEFONTE CIR.
City-St-Zip: ASHLAND, KY 41101

Title: MGRM () Delete
Name: GUPTA, RAMESH
Address: 1400 EASTON DRIVE #106
City-St-Zip: BAKERSFIELD, CA 93309

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: GITIKA BAFNA

MGRM

02/12/2009

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