

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025289

FILED
Feb 19, 2009
Secretary of State

Entity Name: ABSOLUTE DISASTER SERVICES, LLC

Current Principal Place of Business:

9640 BOGGY CREEK ROAD
UNIT 6
ORLANDO, FL 32824

New Principal Place of Business:

8034 SUNPORT DRIVE
SUITE 401
ORLANDO, FL 32809

Current Mailing Address:

6039 CYPRESS GARDENS BLVD.
#502
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 20-2518695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, GEORGE
9640 BOGGY CREEK RD
UNIT 6
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

HERNANDEZ, GEORGE
8034 SUNPORT DRIVE
SUITE 401
ORLANDO, FL 32809 US

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:

02/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HERNANDEZ, GEORGE
Address: 287 WOODBURY PINES CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: MGR () Delete
Name: HERNANDEZ, MARILYN
Address: 287 WOODBURY PINES CIRCLE
City-St-Zip: ORLANDO, FL 32828

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: GEORGE HERNANDEZ

MGR

02/19/2009

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