2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# L05000025924

Entity Name: RELIASERVE, LLC

Current Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
SUITE 435
SUNRISE, FL 33323 US

New Principal Place of Business:

12401 ORANGE DRIVE
SUITE 213
DAVIE, FL 33330 US

Current Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY
SUITE 435
SUNRISE, FL 33323 US

New Mailing Address:

12401 ORANGE DRIVE
SUITE 213
DAVIE, FL 33330 US

FEI Number: 75-3185885 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYNCH, MICHAEL P
3023 SW 141 TERRACE
DAVIE, FL, FL 33330 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: LYNCH, MICHAEL P
Address: 3023 SW 141 TERRACE
City-St-Zip: DAVIE, FL 33029

Title: MGRM ( ) Delete
Name: BARALT, JOAQUIN J
Address: 13505 SW 104 TERRACE
City-St-Zip: MIAMI, FL 33186 US

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: MICHAEL LYNCH PRES 04/28/2007

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