

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025966

Entity Name: ILEADER SOLUTIONS, LLC

FILED
May 18, 2006
Secretary of State

Current Principal Place of Business:

3531 HEARDS FERRY DRIVE
TAMPA, FL 33618 US

New Principal Place of Business:

1301 W FLETCHER AVE
TAMPA, FL 33612 US

Current Mailing Address:

3531 HEARDS FERRY DRIVE
TAMPA, FL 33618 US

New Mailing Address:

PO BOX 274126
TAMPA, FL 33688 US

FEI Number: 06-1720293 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: MGR () Delete
Name: ORTOLL, MICHAEL O
Address: 3531 HEARDS FERRY DRIVE
City-St-Zip: TAMPA, FL 33618 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ORTOLL, MICHAEL
Address: 1301 W FLETCHER AVE
City-St-Zip: TAMPA, FL 33612 US

I hereby certify that the information supplied with this filing does not qualify for the 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 ORTOLL

MGR

05/18/2006

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