

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027848

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: Q & A INTEGRATED SOLUTIONS, LLC

**Current Principal Place of Business:**

1129 MILAN AVENUE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

1129 MILAN AVENUE  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 42-1708749

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERNANDEZ, MARTHA  
1129 MILAN AVENUE  
CORAL GABLES, FL 33134 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: QUINTANA, ANDRES  
Address: 4612 SCHIRTZINGER RD  
City-St-Zip: HILLIARD, OH 43026

Title: MGR ( ) Delete  
Name: ABELAIRAS, VICTOR  
Address: 300 N. STATE ST., UNIT 2324  
City-St-Zip: CHICAGO, IL 60610

**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: VICTOR ABELAIRAS

MGR

03/28/2008

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