2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062496

Entity Name: ONE-STOP PROJECT SOLUTIONS, LLC

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2165 SOUTHWEST 103RD PLACE 4765 NW 17 AVE MIAMI, FL 33165 MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** 2165 SOUTHWEST 103RD PLACE MIAMI, FL 33165 FEI Number: 30-0325740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRIANA, LOURDES 2165 SW 103 PL MIAMI, FL 33165 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete TRIANA, LOURDES Name: Name: 2165 SOUTHWEST 103RD PLACE Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: MGR Title: () Delete () Change () Addition TRIANA, WILLIAN Name: Name: Address: 2165 SOUTHWEST 103RD PLACE Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition BLANC, SOPHIE Name: RODRIGUEZ, RAMSES Name: 2165 SOUTHWEST 103RD PLACE 2165 SOUTHWEST 103RD PLACE Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33165 Title: () Delete Title: () Change () Addition Name: TRIANA, WILLIAN Name: 2165 SOUTHWEST 103RD PLACE Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: () Delete Title: () Change () Addition TRIANA, LOURDES Name: Name: 2165 SW 103 PL Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: () Delete Title: () Change () Addition BLANC, SOPHIE Name: Name: Address: 2165 SW 103 PL Address: MIAMI, FL 33165 City-St-Zip: City-St-Zip:

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: LOURDES TRIANA P 01/08/2007