

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000066448

Entity Name: AMS GROUP, L.L.C.

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5380 NORTH OCEAN DRIVE  
#19-I  
SINGER ISLAND, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

20 CROSSROADS DRIVE  
SUITE 215  
OWINGS MILLS, MD 21117

**New Mailing Address:**

FEI Number: 20-2942690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ESTRELLA, SUSAN  
416 3RD AVENUE NORTH  
LAKE WORTH, FL 33460 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  
Name: ROSENBERG, KEITH A  
Address: 1020 PARK AVE. #507  
City-St-Zip: BALTIMORE, MD 21201

Title: MGRM  
Name: HANKOFF, STEVEN A  
Address: 20 CROSSRADS DRIVE, SUITE 215  
City-St-Zip: OWINGS MILLS, MD 21117

I hereby 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: STEVEN A. HANKOFF

MGRM

01/05/2010

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