

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071384

Entity Name: ENIX IT SOLUTIONS, LLC

FILED  
Jan 11, 2009  
Secretary of State

## Current Principal Place of Business:

524 69TH AVENUE  
SUITE 102  
ST PETE BEACH, FL 33706 US

## New Principal Place of Business:

907 GRAY STREET SOUTH  
GULFPORT, FL 33707 US

## Current Mailing Address:

PO BOX 67438  
ST. PETE BEACH, FL 33736 US

## New Mailing Address:

FEI Number: 20-3123754      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KULECI, CHRISTOPHER A  
524 69TH AVE  
SUITE 102  
ST PETE BEACH, FL 33706 US

## Name and Address of New Registered Agent:

KULECI, CHRISTOPHER A  
907 GRAY STREET SOUTH  
GULFPORT, FL 33707 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:

01/11/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: KULECI, CHRISTOPHER A  
Address: 524 69TH AVENUE, #102  
City-St-Zip: ST. PETE BEACH, FL 33706 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: KULECI, CHRISTOPHER A  
Address: 907 GRAY STREET SOUTH  
City-St-Zip: GULFPORT, FL 33707 US

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: CHRISTOPHER A. KULECI

MR.

01/11/2009

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