

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098953

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: TOTAL SERVER SOLUTIONS L.L.C.

**Current Principal Place of Business:**

3015 PINE ISLAND ROAD, S.W., STE. 113-274  
CAPE CORAL, FL 33915

**New Principal Place of Business:**

**Current Mailing Address:**

3015 PINE ISLAND ROAD, S.W., STE. 113-274  
CAPE CORAL, FL 33915

**New Mailing Address:**

FEI Number: 16-1742051      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SIMAT, GARY  
3015 PINE ISLAND ROAD, S.W., STE. 113-274  
CAPE CORAL, FL 33915 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 ( ) Delete  
Name: SIMAT INC.  
Address: 3015 PINE ISLAND ROAD, S.W., STE. 113-274  
City-St-Zip: CAPE CORAL, FL 33915

Title: MGRM ( ) Delete  
Name: CARLUCCIO SAPRIZA, CARLOS I  
Address: JOSE MARTI 3214  
City-St-Zip: MONTEVIDEO, URUGUAY 113000,

Title: MGRM ( ) Delete  
Name: MALDONADO BRICENO, CARLOS R  
Address: RES. LA HACIENDA, TORRE D, APT. A-41  
City-St-Zip: SAN CRISTOBAL,TACH,VENEZUELA,

Title: MGRM ( ) Delete  
Name: JOHN WIGLE ENTERPRISES INC.  
Address: 10207 MERREDITH CIRCLE APT 308  
City-St-Zip: BURKE, VA 22015

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SIMAT, GARY  
Address: 3015 PINE ISLAND ROAD, S.W., STE. 113-274  
City-St-Zip: CAPE CORAL, FL 33915

Title: MGRM (X) Change ( ) Addition  
Name: WIGLE, JOHN G JR.  
Address: 10207 MERREDITH CIRCLE APT 308  
City-St-Zip: BURKE, VA 22015

Title: MGRM (X) Change ( ) Addition  
Name: PUENTE BEACH INC  
Address: WICKHAMS CAY, P.O. BOX 662  
City-St-Zip: WANCHESE, NC 27981

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: GARY SIMAT

MGRM

04/24/2009

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