

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000099281

FILED
May 07, 2007
Secretary of State

Entity Name: ULTIMATE SOLUTION INVESTMENT LLC

Current Principal Place of Business:

110 HENDRICKS ISLE
SUITE #4A
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

MARCO ISLAND
MARCO ISLAND, FL 34145

Current Mailing Address:

PO BOX 613091
N MIAMI, FL 33261

New Mailing Address:

APO BOX 73071
MARCO ISLAND, FL 34145

FEI Number: 20-3596439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BACHOO, STEPHANIE A
110 HENDRICKS ISLE
SUITE # 4A
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

COPORATE CREATIONS INTERNATIONAL INC
941 FOURTH STREET
MIAMI BEACH, FL 33141 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: COPORATE CREATIONS INTERNATIONAL INC

05/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BACHOO, STEPHANIE A
Address: PO BOX 613091
City-St-Zip: N MIAMI, FL 33261

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: R. L. A. HOUSE HOLD, TRUST
Address: APO BOX 73071
City-St-Zip: MARCO ISLAND, FL 34145

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: R. L. A. HOUSE HOLD TRUST

MGR

05/07/2007

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