

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109318

FILED  
Apr 12, 2009  
Secretary of State

Entity Name: INTEGRATED OIL SOLUTIONS, LLC

## Current Principal Place of Business:

5911 W 16 LANE  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

7416 ELLIOTT LANE  
LEEDS, AL 35094

## New Mailing Address:

FEI Number: 20-3759774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IRENE RIMER  
7416 ELLIOTT LANE  
LEEDS, FL 35094 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: MGR ( ) Delete  
Name: ROMERO, JESUS E  
Address: 11356 NW 73 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: MGR ( ) Delete  
Name: PESTANA, DORIS C  
Address: 11356 NW 73 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: MGR ( ) Delete  
Name: RIMER, DAVID R  
Address: 11356 NW 73 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: MGR ( ) Delete  
Name: CENTENO, ASTRID M  
Address: 5911 W 16 LANE  
City-St-Zip: HIALEAH, FL 33012

Title: MGR ( ) Delete  
Name: GIL, ALBERTO A  
Address: 5911 W 16 LANE  
City-St-Zip: HIALEAH, FL 33012

Title: MGR ( ) Delete  
Name: MEDINA, ASDRUBAL E  
Address: 5911 W 16 LANE  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAVID RIMER

MRG

04/12/2009

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