

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000119589

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** ADMINISTRATIVE SOLUTIONS PLUS, LLC

**Current Principal Place of Business:**

225 W. DILIDO DR.  
MIAMI BCH, FL 33139

**New Principal Place of Business:**

225 W. DILIDO DR.  
MIAMI BCH, FL 33139 US

**Current Mailing Address:**

225 W. DILIDO DR.  
MIAMI BCH, FL 33139

**New Mailing Address:**

1602 ALTON ROAD  
383  
MIAMI BCH, FL 33139 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SILVERIO, BRIAN M ESQ.  
150 W. FLAGLER STREET, PENTHOUSE 2850  
MIAMI, FL 33130 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  
Name: WALLACK, HOLLY  
Address: 225 W. DILIDO DR.  
City-St-Zip: MIAMI BCH, FL 33139

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: HOLLY S. WALLACK

MGR

03/30/2010

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