2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L06000060172

Entity Name: QUALITY BOOKKEEPING SOLUTIONS LLC

Current Principal Place of Business:

10511 NW 21 COURT
SUNRISE, FL 33322

New Principal Place of Business:

600 NORTH PINE ISLAND ROAD
STE 450/458
PLANTATION, FL 33324

Current Mailing Address:

PO BOX 450421
SUNRISE, FL 33345

New Mailing Address:

600 NORTH PINE ISLAND ROAD
STE 450/458
PLANTATION, FL 33324

FEI Number: 20-5027660 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORALES, KATIE L
10511 NW 21 COURT
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

MORALES, KATIE L
600 NORTH PINE ISLAND ROAD
STE 450/458
PLANTATION, FL 33324 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: KATIE L MORALES 04/30/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MORALES, KATIE L
Address: PO BOX 450421
City-St-Zip: SUNRISE, FL 33345

ADDITIONS/CHANGES:

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: KATIE L MORALES MGR 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date