# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 05, 2012**
**Secretary of State**

DOCUMENT# L06000083193

**Entity Name:** ERAS SOFTWARE SOLUTIONS, LLC

**Current Principal Place of Business:**

12505 ORANGE DRIVE
SUITE 901
DAVIE, FL 33330 US

**New Principal Place of Business:**

12525 ORANGE DRIVE
SUITE 705
DAVIE, FL 33330 US

**Current Mailing Address:**

12505 ORANGE DRIVE
SUITE 901
DAVIE, FL 33330 US

**New Mailing Address:**

12525 ORANGE DRIVE
SUITE 705
DAVIE, FL 33330 US

**FEI Number: 26-0578237** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

ANTONIO, MORENO C
12505 ORANGE DR.
SUITE 901
DAVIE, FL 33330 US

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

ANTONIO, MORENO C
12525 ORANGE DR.
SUITE 705
DAVIE, FL 33330 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: ANTONIO MORENO 04/05/2012
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM
Name: ANTONIO, MORENO C
Address: 12525 ORANGE DR SUITE 705
City-St-Zip: DAVIE, FL 33330 US

Title: MGRM
Name: FEDERICO, SANTARELLI J
Address: 12525 ORANGE DR SUITE 705
City-St-Zip: DAVIE, FL 33330 US

Title: MGRM
Name: FELIX, OHEP A
Address: 12525 ORANGE DR SUITE 705
City-St-Zip: DAVIE, FL 33330 US

Title: MGRM
Name: JAVIER, MANRIQUE
Address: 12525 ORANGE DR SUITE 705
City-St-Zip: DAVIE, FL 33330 US

Title: MGRM
Name: ANACA GROUP LLC
Address: 12525 ORANGE DR SUITE 705
City-St-Zip: DAVIE, FL 33330 US

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 Statues.

SIGNATURE: ANTONIO MORENO MGRM 04/05/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date