

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090892

FILED
Apr 24, 2007
Secretary of State

Entity Name: ACCOUNTING EXPRESS & BUSINESS SERVICES, LLC

Current Principal Place of Business:

3501 SW 107 AVENUE
N/A
MIAMI, FL 33165

New Principal Place of Business:

10661 N. KENDALL DRIVE
SUITE 113
MIAMI, FL 33176

Current Mailing Address:

3501 SW 107 AVENUE
N/A
MIAMI, FL 33165

New Mailing Address:

10661 N. KENDALL DRIVE
SUITE 113
MIAMI, FL 33176

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

Name and Address of Current Registered Agent:

DIAZ, NELSON SR
3501 SW 107 AVENUE
N/A
MIAMI, FL 33165 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: MGRM () Delete
Name: DIAZ-SOLIS, ERWIN N
Address: 3501 SW 107 AVENUE
City-St-Zip: MIAMI, FL 33165 US

Title: MGR () Delete
Name: BARANDIARAN, CLAUDIA M
Address: 3501 SW 107 AVENUE
City-St-Zip: MIAMI, FL 33165 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DIAZ-SOLIS, ERWIN N
Address: 10661 N. KENDALL DRIVE, SUITE 113
City-St-Zip: MIAMI, FL 33176 US

Title: MGR (X) Change () Addition
Name: BARANDIARAN, CLAUDIA M
Address: 10661 N. KENDALL DRIVE, SUITE 113
City-St-Zip: MIAMI, FL 33176 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ERWIN DIAZ-SOLIS

P

04/24/2007

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