

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000094028

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** INTERCONTINENTAL MANAGEMENT SOLUTIONS LLC

**Current Principal Place of Business:**

440 FONTANA CIR  
SUITE 208  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

440 FONTANA CIR  
SUITE 208  
OVIEDO, FL 32765

**New Mailing Address:**

**FEI Number:** 20-5604050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ELHAYEK, HASSAN  
440 FONTANA CIR, STE 208  
OVIEDO, FL 32765 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: PIEDRAHITA, JUAN C  
Address: 10605 VERSAILLES BLVD  
City-St-Zip: WELLINGTON, FL 33449

Title: D  
Name: ELHAYEK, HASSAN  
Address: 440 FONTANA CIR, STE 208  
City-St-Zip: OVIEDO, FL 32765

Title: MGR  
Name: ROMERO, ANDRES  
Address: URB. BUCARE # 6 CALLE ZAFIRO  
City-St-Zip: GUAYNABO, PR 00969

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: HASSAN ELHAYEK

D

01/21/2010

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