2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106434

Address:

City-St-Zip:

5440 NW 33 AVE # 106

FT. LAUDERDALE, FL 33309

Entity Name: FULL SPECTRUM SOLUTIONS, LLC

FILED Mar 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5440 NW 33 AVENUE SUITE 106 FORT LAUDERDALE, FL 33309 US **New Mailing Address: Current Mailing Address: 5440 NW 33 AVENUE** SUITE 106 FORT LAUDERDALE, FL 33309 US FEI Number: 20-5895504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SILVER, RYAN C MEMB 5440 NW 33 AVE SUITE 106 FT. LAUDERDALE, FL 33309 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SILVER, RYAN C MGRM Name: Name: 5440 NW 33 AVENUE, SUITE 106 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: SILVER, SCOTT R MEMB Name: Address: 5440 NW 33 AVENUE. SUITE 106 Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: MGR () Delete Title: () Change () Addition SILVER, JUDD'S MEMB Name: Name: 5440 NW 33 AVENUE, SUITE 106 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: () Delete Title: MGR Title: () Change () Addition Name: CHAMPAGNIE, SAMORI MEMB Name:

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.

Address:

City-St-Zip:

SIGNATURE: RYAN SILVER MGRM 03/18/2009