

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108594

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: URBAN SOLUTIONS GROUP, LLC

## Current Principal Place of Business:

900 N FEDERAL HIGHWAY  
SUITE 306  
HALLANDALE BEACH, FL 33009

## New Principal Place of Business:

950 PENINSULA CORP CIR  
#2005  
BOCA RATON, FL 33487

## Current Mailing Address:

950 PENINSULA CORP CIR  
2000  
BOCA RATON, FL 33487

## New Mailing Address:

FEI Number: 20-5638018      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAW OFFICE OF MITCHELL J. NOWACK, P.A.  
8180 NW 36 STREET  
SUITE 209  
DORAL, FL 33166 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: SMOKE, STEVE C  
Address: 3101 S OCEAN DRIVE  
City-St-Zip: HALLANDALE, FL 33009

Title: MGRM ( ) Delete  
Name: BUSH, DEVIN  
Address: 10278 LAUREL ROAD  
City-St-Zip: DAVIE, FL 33328

Title: MGRM ( ) Delete  
Name: LOPEZ, JAIME  
Address: 6330 LAKE GENEVE ROAD  
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM ( ) Delete  
Name: JENKINS, CHERYL  
Address: 2544 CENTERGATE DRIVE, UNIT 203  
City-St-Zip: MIRAMAR, FL 33025

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STEVE SMOKE

MGRM

04/24/2008

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