

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118052

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE RESULTS COMPANIES, LLC

Current Principal Place of Business:

499 SHERIDAN STREET #400
DANIA, FL 33004

New Principal Place of Business:

Current Mailing Address:

499 SHERIDAN STREET #400
DANIA, FL 33004

New Mailing Address:

FEI Number: 20-8045951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROUSSO, MARK ESQ.
18851 NE 29TH AVE. SUITE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

MONTERO, JULIAN F
201 S. BISCAYNE BLVD.
STE. 905, MIAMI CENTE
MIAMI, FL 33131 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: JULIAN F MONTERO

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FINE, JASON
Address: 499 SHERIDAN STREET #400
City-St-Zip: DANIA, FL 33004

Title: MGR () Delete
Name: SCHEIN, ALAN
Address: 499 SHERIDAN STREET #400
City-St-Zip: DANIA, FL 33004

Title: MGR () Delete
Name: RAPP, ROBERT
Address: 499 SHERIDAN STREET #400
City-St-Zip: DANIA, FL 33004

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:

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: ROBERT RAPP

MGR

04/30/2009

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