

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000011806

FILED
Apr 30, 2008
Secretary of State

Entity Name: RESULTS CUSTOMER CARE, 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: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUSSO, MARK
18851 NE 29TH AVENUE, SUITE 900
C/O ROTH, ROUSSO & KATSMAN, LLP
AVENTURA, FL 33180 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 () Delete
Name: RAPP, ROBERT
Address: 499 SHERIDAN STREET, #400
City-St-Zip: DANIA, FL 33004

Title: MGR () Delete
Name: SWEAT, BRIAN A
Address: 5131 CLOVER MIST DRIVE
City-St-Zip: APOLLO BEACH, FL 33572

Title: MGR () Delete
Name: SCHEIN, ALAN
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

04/30/2008

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