

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000011806

**FILED**  
**Apr 17, 2010**  
**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 (X)**

**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  
Name: RAPP, ROBERT  
Address: 499 SHERIDAN STREET, #400  
City-St-Zip: DANIA, FL 33004

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

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:** ALAN SCHEIN

MGR

04/17/2010

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