

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013284

Entity Name: XS SOLUTIONS, LLC

FILED
May 18, 2009
Secretary of State

Current Principal Place of Business:

519 SW 147TH AVENUE
PEMBROKE PINES, FL 33127

New Principal Place of Business:

Current Mailing Address:

519 SW 147TH AVENUE
PEMBROKE PINES, FL 33127

New Mailing Address:

FEI Number: 20-8380965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

THE LAW OFFICE OF JORGE L. MONTERO, P.A.
1071 NW 21ST STREET
FORT LAUDERDALE, FL 33311 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:

Title: MGRM () Delete
Name: SEDANO, DIEGO H
Address: 519 SW 147TH AVE
City-St-Zip: HOLLYWOOD, FL 33027

Title: MGRM (X) Delete
Name: ORTEGA, JAIRD S
Address: 18042 NW 91ST COURT
City-St-Zip: HIALEAH, FL 33018

Title: MGRM (X) Delete
Name: CHIRINO, YIMY F
Address: 19501 STERLING DRIVE
City-St-Zip: MIAMI, FL 33157

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: DIEGO SEDANO

MGRM

05/18/2009

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