2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# L07000022996

Entity Name: MARKETING SOLUTIONS UNLIMITED LLC

Current Principal Place of Business:

136 BUTLER ROAD
BRANDON, FL 33511 US

New Principal Place of Business:

4238 BALINGTON DRIVE
VALRICO, FL 33594 US

Current Mailing Address:

136 BUTLER ROAD
BRANDON, FL 33511 US

New Mailing Address:

4238 BALINGTON DRIVE
VALRICO, FL 33594 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLOUFF, AMIELLE
136 BUTLER ROAD
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

PLOUFF, AMIELLE
4238 BALINGTON DRIVE
VALRICO, FL 33594 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: AMIELLE PLOUFF 04/25/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PLOUFF, JASON A
Address: 136 BUTLER ROAD
City-St-Zip: BRANDON, FL 33511 US

Title: MGRM ( ) Delete
Name: PLOUFF, AMIELLE
Address: 136 BUTLER ROAD
City-St-Zip: BRANDON, FL 33511 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: PLOUFF, JASON A
Address: 4238 BALINGTON DRIVE
City-St-Zip: VALRICO, FL 33594 US

Title: MGR (X) Change ( ) Addition
Name: PLOUFF, AMIELLE
Address: 4238 BALINGTON DRIVE
City-St-Zip: VALRICO, FL 33594 US

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: AMIELLE PLOUFF MGR 04/25/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date