2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# L07000032155

Entity Name: ALL PHASES SERVICES, LLC

Current Principal Place of Business:

222 HALTON CIR.
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

222 HALTON CIR.
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 20-8838562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, OSCAR
222 HALTON CIR.
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

TORRES, OSCAR L
222 HALTON CIR.
SEFFNER, FL 33584 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: OSCAR L TORRES 04/26/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: TORRES, OSCAR
Address: 222 HALTON CIR.
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: TORRES, OSCAR L
Address: 222 HALTON CIR.
City-St-Zip: SEFFNER, FL 33584

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: OSCAR L TORRES MGRM 04/26/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date