

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038824

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** REVOLUTUS, LLC

**Current Principal Place of Business:**

2775 SHIPPING AVE.  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 618245  
ORLANDO, FL 32861

**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:**

SCHWARTZ, PHILIP  
2775 SHIPPING AVE.  
MIAMI, FL 33133 US

**Name and Address of New Registered Agent:**

SCHWARTZ, PHILIP M  
2775 SHIPPING AVE.  
MIAMI, FL 33133 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: PHILIP SCHWARTZ

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHWARTZ, PHILIP  
Address: PO BOX 618245  
City-St-Zip: ORLANDO, FL 32861

Title: MGRM ( ) Delete  
Name: AMANN, RICHARD  
Address: P.O. BOX 618245  
City-St-Zip: ORLANDO, FL 32861

**ADDITIONS/CHANGES:**

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: PHILIP SCHWARTZ

PRES

04/28/2009

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