

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000070225

FILED  
Apr 08, 2008  
Secretary of State

Entity Name: INTEGRAL SUPPORT & SERVICES, LLC

## Current Principal Place of Business:

210 SW 15 RD #302  
MIAMI, FL 33129

## New Principal Place of Business:

2199 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

## Current Mailing Address:

210 SW 15 RD #302  
MIAMI, FL 33129

## New Mailing Address:

2199 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

FEI Number: 26-0544753

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOSHER-BLANCO, ADRIANA M  
210 SW 15 RD #302  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

LOSHER-BLANCO, ADRIANA M  
247 SW 8ST  
438  
MIAMI, FL 33130 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:

04/08/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LOSHER-BLANCO, ADRIANA M  
Address: 210 SW 15 RD #302  
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete  
Name: DELL'OVO WENZELMANN, JEANNETTE  
Address: 210 SW 15 RD #302  
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete  
Name: TERREN BORDES, MAURICIO  
Address: 210 SW 15 RD #302  
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete  
Name: ITRIAGO ALVAREZ, LEONOR ISABEL  
Address: 210 SW 15 RD #302  
City-St-Zip: MIAMI, FL 33129

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LOSHER-BLANCO, ADRIANA M  
Address: 247 SW 8ST #438  
City-St-Zip: MIAMI, FL 33130

Title: MGRM (X) Change ( ) Addition  
Name: DELL OVO WENZELMANN, JEANNETTE  
Address: 2199 PONCE DE LEON BLVD., SUITE 200  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change ( ) Addition  
Name: TERREN BORDES, MAURICIO  
Address: 2199 PONCE DE LEON BLVD, SUITE 200  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change ( ) Addition  
Name: ITRIAGO ALVAREZ, LEONOR ISABEL  
Address: 2199 PONCE DE LEON BLVD, SUITE 200  
City-St-Zip: CORAL GABLES, FL 33134

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: ADRIANA M LOSCHER BLANCO

MGRM

04/08/2008

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