2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L07000072007

Entity Name: AVATAR SOLUTIONS L.L.C.

Current Principal Place of Business:

1750 N.E. 191 ST.
427
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

1750 N.E. 191 ST.
427
MIAMI, FL 33179

New Mailing Address:

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

Name and Address of Current Registered Agent:

QUICENO, SYFFER A
1750 N.E. 191 ST.
427
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: QUICENO, SYFFER A
Address: 1750 NE 191 ST #427
City-St-Zip: MIAMI, FL 33179

Title: MGR ( ) Delete
Name: QUICENO, EDGAR
Address: 1750 N.E. 191 ST.ST NO. 427
City-St-Zip: MIAMI, FL 33179

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: SYFFER QUICENO D 04/28/2009

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