2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2008
Secretary of State

DOCUMENT# L07000085831

Entity Name: TRIANGULATED SOLUTIONS LLC

Current Principal Place of Business:

2106 JUDITH PLACE
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2106 JUDITH PLACE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 26-0759189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AXEL, DAVID J
2106 JUDITH PLACE
LONGWOOD, FL 32779 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: MGRM ( ) Delete
Name: AXEL, DAVID J
Address: 2106 JUDITH PLACE
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGRM ( ) Delete
Name: PANAGGIO, MICHAEL J
Address: 6184 SHORELINE DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

Title: MGRM ( ) Delete
Name: JAYBIRD, LLC,
Address: 232 ZAHARIAS CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32124 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: AXEL & ASSOCIATES, I, NC.
Address: 2106 JUDITH PLACE
City-St-Zip: LONGWOOD, FL 32779 US

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: DAVID J. AXEL PRES 04/26/2008

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