

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107455

FILED  
Jun 09, 2009  
Secretary of State

Entity Name: CALL SERVICE NETWORK LLC

## Current Principal Place of Business:

655 ELDRON DRIVE  
SUITE 2  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

655 ELDRON DRIVE  
SUITE 2  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 26-1304364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNANDEZ, DAYSI V  
655 ELDRON DRIVE  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

MARIA, PRITCHARD  
655 ELDRON DR  
#32  
MIAMI, FL 33166 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: MARIA PRITCHARD

06/09/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HERNANDEZ, DAYSI V  
Address: 655 ELDRON DRIVE SUITE 2  
City-St-Zip: MIAMI, FL 33166

Title: MGRM ( ) Delete  
Name: ARIAS, MARCELA  
Address: 655 ELDRON DRIVE SUITE 2  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PRITCHARD, MARIA  
Address: 655 ELDRON DRIVE SUITE 2  
City-St-Zip: MIAMI, FL 33166

Title: MGRM (X) Change ( ) Addition  
Name: HERNANDEZ, DAYSI V  
Address: 655 ELDRON DRIVE SUITE 2  
City-St-Zip: MIAMI, FL 33166

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: DAYSI HERNANDEZ

MGRM

06/09/2009

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