

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000113563

FILED
Mar 07, 2008
Secretary of State

Entity Name: THE RIGHT SOLUTION, LLC

Current Principal Place of Business:

1820 N CORPORATE LAKES BLVD., SUITE 108
WESTON, FL 33326

New Principal Place of Business:

2213 N COMMERCE PARKWAY
WESTON, FL 33326

Current Mailing Address:

1820 N CORPORATE LAKES BLVD., SUITE 108
WESTON, FL 33326

New Mailing Address:

2213 N COMMERCE PARKWAY
WESTON, FL 33326

FEI Number: 26-1413116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

QUINTERO, JUAN C
9222 W. ATLANTIC BLVD. #1312
CORAL SPRINGS, FL 33071 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: MGR () Delete
Name: TORO, CLAUDIA
Address: 1820 N CORPORATE LAKES BLVD., SUITE 108
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: QUINTERO, JUAN C
Address: 1820 N CORPORATE LAKES BLVD., SUITE 108
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TORO, CLAUDIA
Address: 2213 N COMMERCE PARKWAY
City-St-Zip: WESTON, FL 33326

Title: MGR (X) Change () Addition
Name: QUINTERO, JUAN C
Address: 2213 N COMMERCE PARKWAY
City-St-Zip: WESTON, FL 33326

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: CLAUDIA TORO

MGR

03/07/2008

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