

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115487

FILED
May 01, 2008
Secretary of State

Entity Name: WEST INDIES GLOBAL SERVICES , LLC

Current Principal Place of Business:

13150 NW 7TH AVE
MIAMI, FL 33168

New Principal Place of Business:

13136 NW 7TH AVE
MIAMI, FL 33168

Current Mailing Address:

13150 NW 7TH AVE
MIAMI, FL 33168

New Mailing Address:

13136 NW 7TH AVE
MIAMI, FL 33168

FEI Number: 75-3261685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NOEL, VENANT
1780 NE 191 ST
702
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

ERNICE, JOSEPH
13136 NW 7TH AVENUE
MIAMI, FL 33168 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: ERNICE JOSEPH

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NOEL, VENANT
Address: 1780 NE 191 ST
City-St-Zip: MIAMI, FL 33179

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: JOSEPH, ERNICE
Address: 13136 NW 7TH AVENUE
City-St-Zip: MIAMI, FL 33168

Title: VP () Change (X) Addition
Name: JOSEPH, ROSELAINE
Address: 13136 NW 7TH AVE
City-St-Zip: MIAMI, FL 33168 US

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: ERNICE JOSEPH

P

05/01/2008

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