

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127149

FILED  
Feb 21, 2008  
Secretary of State

**Entity Name:** EFFICIENT SOLAR SOLUTIONS, LLC

**Current Principal Place of Business:**

1901 BRICKELL AVENUE  
B2412  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

1901 BRICKELL AVENUE  
B2412  
MIAMI, FL 33129

**New Mailing Address:**

**FEI Number:** 26-1629818      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRONDIN, BERNARD P  
1901 BRICKELL AVENUE  
B2412  
MIAMI, FL 33129 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: GRONDIN, BERNARD P  
Address: 1901 BRICKELL AVENUE, B2412  
City-St-Zip: MIAMI, FL 33129 US

Title: MGR ( ) Delete  
Name: CORDERO, MARCOS  
Address: 117 LAKELAND DRIVE  
City-St-Zip: ATLANTA, GA 30305 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: CORDERO, MARCOS  
Address: 2450 LOUISIANA ST., SUITE 400-612  
City-St-Zip: HOUSTON, TX 77006 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: BERNARD P. GRONDIN

MGR

02/21/2008

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