

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015034

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: NEW LASER SOLUTIONS, LLC

**Current Principal Place of Business:**

4016 EDGEWATER DRIVE  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

**Current Mailing Address:**

4016 EDGEWATER DRIVE  
ORLANDO, FL 32804 US

**New Mailing Address:**

SHUTTLE WAY, 6601  
E  
CAPE CANAVERAL, FL 32920 US

FEI Number: 26-1908361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: DOEVE, MARGUERITE T  
Address: 4016 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804 US

Title: MGRM (X) Delete  
Name: ALLIE, CAROLIN H  
Address: 4016 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804 US

**ADDITIONS/CHANGES:**

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: M.T. DOEVE

CEO

04/17/2009

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