

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030893

FILED
Jan 21, 2009
Secretary of State

Entity Name: ADVANCED INTELLIGENCE LLC

Current Principal Place of Business:

1495 FOREST HILL BLVD
SUITE B
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

1495 FOREST HILL BLVD
SUITE B
WEST PALM BEACH, FL 33406 US

New Mailing Address:

P.O. BOX 02-5289
SECTION 11172
MIAMI, FL 33102 US

FEI Number: 75-3267275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CR COOPER CPA PA
1495 FOREST HILL BLVD
SUITE B
WEST PALM BEACH, FL 33406 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: SIEBERT, ANDREAS
Address: 1495 FOREST HILL BLVD, STE B
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: MGRM () Delete
Name: BIHR, RUDOLF
Address: 1495 FOREST HILL BLVD, STE B
City-St-Zip: WEST PALM BEACH, FL 33406 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SIEBERT, ANDREAS
Address: P.O. BOX 02-5289 SECTION 11172
City-St-Zip: MIAMI, FL 33102 US

Title: MGRM (X) Change () Addition
Name: BIHR, RUDOLF
Address: P.O. BOX 02-5289 SECTION 11172
City-St-Zip: MIAMI, FL 33102 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: ANDREAS SEIBERT

MGRM

01/21/2009

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