2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 13, 2009
Secretary of State

DOCUMENT# L08000086855

Entity Name: ADVANCE DRIVING SOLUTIONS, LLC

Current Principal Place of Business:

530 VICEROY CT
KISSIMMEE, FL 34758

New Principal Place of Business:

Current Mailing Address:

530 VICEROY CT
KISSIMMEE, FL 34758

New Mailing Address:

FEI Number: 26-3441698 **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:

GABRIEL, MARIE-ANNE
530 VICEROY CT
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

GABRIEL, JERHUSSABEL
530 VICEROY CT
KISSIMMEE, FL 34758 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: JERHUSSABEL GABRIEL 05/13/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GABRIEL, MARIE-ANNE
Address: 530 VICEROY CT
City-St-Zip: KISSIMMEE, FL 34758

Title: MGRM ( ) Delete
Name: GABRIEL, JERHUSSABEL
Address: 530 VICEROY CT
City-St-Zip: KISSIMMEE, FL 34758

Title: MGRM ( ) Delete
Name: GABRIEL, HERVE
Address: 530 VICEROY CT
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GABRIEL, JERHUSSABEL
Address: 530 VICEROY CT
City-St-Zip: KISSIMMEE, FL 34758

Title: MGRM (X) Change ( ) Addition
Name: GABRIEL, MARIE-ANNE
Address: 530 VICEROY CT
City-St-Zip: KISSIMMEE, FL 34758

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: JERHUSSABEL GABRIEL MGR 05/13/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date