2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113821

Address:

City-St-Zip:

Entity Name: DIRECT SOLUTIONS & INVESTMENTS LLC

FILED Feb 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2460 N COURTENAY PKWY 218A E EAU GALLIE BLVD #25 MERRITT ISLAND, FL 32953 US INDIAN HARBOUR BEACH, FL 32937 US **Current Mailing Address: New Mailing Address:** PO BOX 560792 218A E EAU GALLIE BLVD #25 ROCKLEDGE, FL 32956 US INDIAN HARBOUR BEACH, FL 32937 US FEI Number: 26-2152418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: TSAI, MICHAEL R ESQUIRE TSAI, MICHAEL R ESQUIRE 8501 ASTRONAUT BLVD 137 S COURTENAY PKWY #583 MERRITT ISLAND, FL 32952 SUITE 301 CAPE CANAVERAL, FL 32920 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: MICHAEL TSAI 02/07/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete STUCKE, ED JR Name: Name: 1660 N HIGHWAY A1A Address: Address: City-St-Zip: INDIALANTIC, FL 32903 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TSUJI, KELBY JR Name: Name: Address: 8230 KEKAHA ROAD Address: City-St-Zip: KEKAHA, HI 93752 US City-St-Zip: Title: MGR Title: () Change () Addition () Delete VOSS, RYAN Name: Name: 2423 SUNSET PEAK ST Address: Address: City-St-Zip: LAS VEGAS, NV 89142 US City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition Name: Name: CALDWELL, JT Address: Address: 101 W GLENN STREET City-St-Zip: City-St-Zip: PAGE, AZ 86040 US Title: () Delete Title: MGR () Change (X) Addition ARCHER, ERIKA Name: Name:

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.

Address:

City-St-Zip:

NHN JENSEN DR

KING SALMON, AK 99613 US

SIGNATURE: ED STUCKE JR MGRM 02/07/2009