

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000000311

FILED  
Jan 06, 2011  
Secretary of State

Entity Name: ALL CELLULAR S. FL LLC.

**Current Principal Place of Business:**

1543 S. CYPRESS  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 6845 GREENFIELD RD  
100  
DETROIT, MI 48228

**New Mailing Address:**

FEI Number: 26-3956273

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALI, MOHAMMAD  
1543 S. CYPRESS  
POMPANO BEACH, FL 33060 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  
Name: ALI, HASSAN  
Address: 1543 S. CYPRESS  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM  
Name: ALI, AHMAD  
Address: 1543 S. CYPRESS  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM  
Name: BAKER, SAMI  
Address: 1543 S. CYPRESS  
City-St-Zip: POMPANO BEACH, FL 33060

I hereby 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: MOHAMAD ALI

RA

01/06/2011

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