

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000066556

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** STRATEGIC INNOVATIVE SOLUTIONS LLC

**Current Principal Place of Business:**

3812 WEST LINEBAUGH AVENUE SUITE 104  
TAMPA, FL 33618 US

**New Principal Place of Business:**

3812 WEST LINEBAUGH AVENUE SUITE 104  
104  
TAMPA, FL 33618 US

**Current Mailing Address:**

3812 WEST LINEBAUGH AVENUE SUITE 104  
TAMPA, FL 33618 US

**New Mailing Address:**

3812 WEST LINEBAUGH AVENUE SUITE 104  
104  
TAMPA, FL 33618 US

**FEI Number:** 27-0541117

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MAYS, IDRIS  
3812 WEST LINEBAUGH AVENUE SUITE 104  
TAMPA, FL 33618 US

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

MAYS, IDRIS  
3812 WEST LINEBAUGH AVENUE SUITE 104  
104  
TAMPA, FL 33618 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:**

02/08/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MAYS, IDRIS  
**Address:** 3812 WEST LINEBAUGH AVENUE SUITE 104  
**City-St-Zip:** TAMPA, FL 33618 US

**Title:** MGRM  
**Name:** PHILLIPS, OLUROTIMI  
**Address:** 3812 WEST LINEBAUGH AVENUE SUITE 104  
**City-St-Zip:** TAMPA, FL 33618 US

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:** OLUROTIMI PHILLIPS

MGRM

02/08/2012

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