

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000070250

Entity Name: CALACOMS SOLUTIONS LLC

**FILED**  
**Sep 07, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2407 NE 33RD AVENUE  
FORT LAUDERDALE, FL 33305 US

**New Principal Place of Business:**

10421 NW 28TH ST  
D-102  
DORAL, FL 33172 US

**Current Mailing Address:**

2407 NE 33RD AVENUE  
FORT LAUDERDALE, FL 33305 US

**New Mailing Address:**

10421 NW 28TH ST  
D-102  
DORAL, FL 33172 US

FEI Number: 27-0597525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
A-100  
TAMPA, FL 33612 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: GRIER, EVERON F  
Address: 2407 NE 33RD AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33305 US

Title: MGRM  
Name: CHAMBERS, CARL  
Address: 2407 NE 33RD AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33305 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: GRIER EVERON

MGRM

09/07/2010

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