

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000075909

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Entity Name:** AAL CARIBBEAN SOURCING SOLUTIONS, LLC

**Current Principal Place of Business:**

8401 NW 17TH STREET  
DEPT. 43-1081  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

8401 NW 17TH STREET  
DEPT. 43-1081  
MIAMI, FL 33126 US

**New Mailing Address:**

155 ANNETTE STREET, POINT PLEASANT PK  
CUNUPIA, TRINIDAD & TOBAGO, -- 00000 TT

**FEI Number:** 42-1768706

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: MGMR  
Name: ALI, ADIL A A  
Address: 8401 NW 17TH STREET, DEPT. 43-1081  
City-St-Zip: MIAMI, FL 33126 US

Title: MGMR  
Name: RAMPERSAD-ALI, LYNETTE  
Address: 8401 NW 17TH STREET, DEPT. 43-1081  
City-St-Zip: MIAMI, FL 33126 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: ADIL A.A.ALI

MGMR

04/15/2011

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