

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000034353

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** DREAM SOLUTIONS & CONSULTANCY, LLC

**Current Principal Place of Business:**

13031 NW 1ST STREET  
PEMBROKE PINES, FL 33028 US

**New Principal Place of Business:**

4435 KENTUCKY WAY  
AVE MARIA, FL 34142 US

**Current Mailing Address:**

13031 NW 1ST STREET  
PEMBROKE PINES, FL 33028 US

**New Mailing Address:**

4435 KENTUCKY WAY  
AVE MARIA, FL 34142 US

**FEI Number:** 27-2231896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MONNEKULAME, CHANNA  
13031 NW 1ST STREET  
PEMBROKE PINES, FL 33028 US

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

MONNEKULAME, CHANNA  
4435 KENTUCKY WAY  
AVE MARIA, FL 34142 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:

04/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MONNEKULAME, CHANNA  
Address: 4435 KENTUCKY WAY  
City-St-Zip: AVE MARIA, FL 34142 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: CHANNA MONNEKULAME

MGRM

04/28/2012

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