

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000109328

Entity Name: JAB7 SOLUTIONS, LLC

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9768 NW 48 TERRACE  
9768 NW 48 TERRACE  
DORAL, FL 33178 UN

**New Principal Place of Business:**

**Current Mailing Address:**

9768 NW 48 TERRACE  
DORAL, FL 33178

**New Mailing Address:**

1327 PORTOFINO CIRCLE  
712  
WESTON, FL 33326

FEI Number: 27-3716441

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALEMAN, MANUEL A MGR  
9768 NW 48 TERRACE  
DORAL, FL 33178 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: MGR  
Name: ALEMAN, MANUEL A  
Address: 9768 NW 48 TERRACE  
City-St-Zip: DORAL, FL 33178

Title: MGRM  
Name: ALEMAN, JESUS A  
Address: 1327 PORTOFINO CIRCLE  
City-St-Zip: WESTON, FL 33326

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: MANUEL ALEMAN

MGMR

04/19/2012

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