

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000015084

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL OFFICE SOLUTIONS, LLC

**Current Principal Place of Business:**

217 BROADWAY  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

217 BROADWAY  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 27-5065018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMBIN, RAYMOND C  
2100 PLEASANT HILL RD  
3  
KISSIMMEE, FL 34746 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:** RAMBIN, RAYMOND  
**Address:** 2100 PLEASANT HILL 3  
**City-St-Zip:** KISSIMMEE, FL 34746

**Title:** MGRM  
**Name:** TANIA RAMIREZ,  
**Address:** 2900 OCONNELL DR  
**City-St-Zip:** KISSIMMEE, FL 34741

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:** RAYMOND RAMBIN

MGR

05/01/2012

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