

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000116170

**FILED**  
**Jun 18, 2012**  
**Secretary of State**

**Entity Name:** BACK OFFICE SUPPORT SYSTEMS LLC

**Current Principal Place of Business:**

5200 N. FEDERAL HIGHWAY  
SUITE 2-1069  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

5200 N. FEDERAL HIGHWAY  
SUITE 2-1069  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

**FEI Number:** 45-3615288

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEREK A. SCHWARTZ, P.A.  
4755 TECHNOLOGY WAY  
SUITE 205  
BOCA RATON, FL 33431 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: OMES, CARLOS  
Address: 5200 N. FEDERAL HIGHWAY - SUITE 2-1069  
City-St-Zip: FORT LAUDERDALE, FL 33308

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: CARLOS OMES

MGR

06/18/2012

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