

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000670

Entity Name: RISK BASED SOLUTIONS, L.C.

FILED
Jan 16, 2006
Secretary of State

Current Principal Place of Business:

5757 BLUE LAGOON DRIVE
SUITE 330
MIAMI, FL 33126

Current Mailing Address:

5757 BLUE LAGOON DRIVE
SUITE 330
MIAMI, FL 33126

New Principal Place of Business:

7301 SW 57TH COURT
SUITE 450
SOUTH MIAMI, FL 33143

New Mailing Address:

7301 SW 57TH COURT
SUITE 450
SOUTH MIAMI, FL 33143

FEI Number: 65-0611820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 336075736 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 () Delete
Name: ALTO MANAGEMENT SERV, ICES, LLC
Address: 5757 BLUE LAGOON DRIVE, SUITE 330
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALTO MANAGEMENT SERV, ICES, LLC
Address: 7301 SW 57TH COURT, SUITE 450
City-St-Zip: SOUTH MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: ALEXANDER SORIA

PRES

01/16/2006

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