


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 25, 2005 08:00 AM
Secretary of State

DOCUMENT # M01000001990 1. Entity Name OPTIMUS SOLUTIONS LLC	
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Principal Place of Business 22 TECHNOLOGY PARKWAY NORCROSS, GA 30092	Mailing Address 22 TECHNOLOGY PARKWAY NORCROSS, GA 30092
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07112005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2403631	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FRAZIER, BLAKE
4630 S. KIRLAND ROAD, SUITE 416
ORLANDO, FL 32811

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO METZ, MARK 22 TECHNOLOGY PARKWAY NORCROSS, GA 30092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSON, STEVE 22 TECHNOLOGY PARKWAY NORCROSS, GA 30092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POTTER, SANDRA P 22 TECHNOLOGY PARKWAY NORCROSS, GA 30092
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **MARK METZ**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7/20/05

770-447-1951

Date Daytime Phone #