## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000006282

Address:

City-St-Zip:

5702 LAKE WORTH ROAD

GREENACRES, FL 33463

Entity Name: BUSINESS STRATEGIES GROUP, LLC

FILED Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6400 PAKR OF COMMERCE BLVD. #2 BOCA RATON, FL 33487 **Current Mailing Address: New Mailing Address:** PO BOX 811209 BOCA RATON, FL 33481 FEI Number: 35-2262217 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete IVG EQUITIES, LLC Name: Name: 6400 PARK OF COMMERCE BLVD Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MAY EQUITIES, LLC Name: Name: Address: 809 WEST AVENUE Address: City-St-Zip: ROCHESTER, NY 14611 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SHELLZ, LLC Name: Name: 6400 PARK OF COMMERCE BLVD STE #2 Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: MGMR ( ) Delete Title: () Change () Addition Name: BALL ALLIANCE, LLC Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: GAIL AMEN MGR 04/29/2009