

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003625

Entity Name: TRISOLVE GROUP LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

3060 NW 190TH STREET
SUITE 211
AVENTURA, FL 33180

New Principal Place of Business:

3060 NE 190TH STREET
SUITE 211
AVENTURA, FL 33180

Current Mailing Address:

3060 NW 190TH STREET
SUITE 211
AVENTURA, FL 33180

New Mailing Address:

3060 NE 190TH STREET
SUITE 211
AVENTURA, FL 33180

FEI Number: 26-2103549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 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: CRONJE, MARK
Address: 3060 NW 190TH STREET
City-St-Zip: AVENTURA, FL 33180

Title: MGR () Delete
Name: LOCKE, KEVIN
Address: 3060 NW 190TH STREET
City-St-Zip: AVENTURA, FL 33180

Title: MGR () Delete
Name: IZQUIERDO, CHRISTIAN
Address: 3060 NW 190TH STREET
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CRONJE, MARK
Address: 3060 NE 190TH STREET
City-St-Zip: AVENTURA, FL 33180

Title: MGR (X) Change () Addition
Name: LOCKE, KEVIN
Address: 3060 NE 190TH STREET
City-St-Zip: AVENTURA, FL 33180

Title: MGR (X) Change () Addition
Name: IZQUIERDO, CHRISTIAN
Address: 3060 NE 190TH STREET
City-St-Zip: AVENTURA, FL 33180

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.

SIGNATURE: KEVIN LOCKE

MGMR

04/15/2009

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