

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000011013

**Entity Name:** USA BUSINESS SOLUTIONS GROUP, LLC

**Current Principal Place of Business:**

4701 SW 45 STREET, BLDG. 9 BAY 22  
DAVIE, FL 33314

**Current Mailing Address:**

PO BOX 801333  
AVENTURA, FL 33280 US

**FEI Number: 43-2006584**

**Certificate of Status Desired: No**

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

GBS CONSULTANTS, INC.  
18501 PINES BLVD.  
SUITE #201  
PEMBROKE PINES, FL 33029 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

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	VALDES, ISABEL	Name	VALDES, MARISABEL
Address	1835 NE MIAMI GARDENS DR. SUITE #475	Address	1835 NE MIAMI GARDENS DR. SUITE #475
City-State-Zip:	MIAMI BEACH FL 33179	City-State-Zip:	MIAMI BEACH FL 33179

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ISABEL VALDES**

**MGRM**

**02/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date