

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000115838

**Entity Name:** ALL BUSINESS SOLUTIONS, LLC.

**Current Principal Place of Business:**

7300 WEST MCNAB ROAD  
214  
TAMARAC, FL 33321

**Current Mailing Address:**

7300 WEST MCNAB ROAD  
214  
TAMARAC, FL 33321 US

**FEI Number:** 26-1951262

**Certificate of Status Desired:** No

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

MARTINEZ, ODALIZ  
2759 CARAMBOLA CIR S  
CORAL SPRINGS, FL 33066 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           | MGR                         | Title           | MGR                         |
| Name            | PINZON, NESTOR E            | Name            | MARTINEZ, ODALIZ            |
| Address         | 7300 WEST MCNAB ROAD<br>214 | Address         | 7300 WEST MCNAB ROAD<br>214 |
| City-State-Zip: | TAMARAC FL 33321            | City-State-Zip: | TAMARAC FL 33321            |

*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:** NESTOR E PINZON

MGR

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date