

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000034245

**FILED**  
**Apr 28, 2006**  
**Secretary of State**

**Entity Name:** EVOS SOUTH TAMPA TPA, LLC

**Current Principal Place of Business:**

609 SOUTH HOWARD AVE.  
TAMPA, FL 33606

**New Principal Place of Business:**

609 SOUTH HOWARD AVE.  
TAMPA, FL 33606 US

**Current Mailing Address:**

609 SOUTH HOWARD AVE.  
TAMPA, FL 33606

**New Mailing Address:**

609 SOUTH HOWARD AVE.  
TAMPA, FL 33606 US

FEI Number: 20-0221400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALKIS, CRASSAS  
609 S HOWARD AV  
TAMPA, FL 33606 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: MGRM ( ) Delete  
Name: EVOS MANAGEMENT LLC,  
Address: 609 S HOWARD AV  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: EVOS MANAGEMENT LLC,  
Address: 609 S HOWARD AV  
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the 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: ALKIS CRASSAS

MGR

04/28/2006

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