

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000035630

**FILED**  
**Apr 27, 2005**  
**Secretary of State**

**Entity Name:** PRO-STAFF INVESTMENTS, LLC

**Current Principal Place of Business:**

4915 CARDER RD  
ORLANDO, FL 32810

**New Principal Place of Business:**

384 MEADOW BEAUTY TERRACE  
SANFORD, FL 32771

**Current Mailing Address:**

4915 CARDER ROAD  
ORLANDO, FL 32810

**New Mailing Address:**

384 MEADOW BEAUTY TERRACE  
SANFORD, FL 32771

**FEI Number:** 20-0243852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLER, SOUTH & MILHAUSEN, P.A.  
2699 LEE ROAD, SUITE 120  
WINTER PARK, FL 32789 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: WELCH, ROBERT JR.  
Address: 384 MEADOW BEAUTY TERRACE  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT WELCH

MGR

04/27/2005

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