

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 13, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000001292

1. Entity Name
CRS FACILITY SERVICES, LLC



Principal Place of Business
2 SOUTH BISACYNNE BLVD.
SUITE 205
MIAMI, FL 33131

Mailing Address
2 SOUTH BISACYNNE BLVD.
SUITE 205
MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE



03162004No Chg-LLC

CR2E083 (10/03)

4. FEI Number
22-3695494

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MUNROE, W. BRADLEY ESQ.
239 E. VIGINIA ST.
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2004

U00000111852
04/13/04-80037-013 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
RIZZUTO, WILLIAM JR.
475 MARKET ST.
ELMWOOD PARK, NJ 07407

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
SCHOLZ, THOMAS
475 MARKET ST.
ELMWOOD PARK, NJ 07407

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
CARR, PAUL
475 MARKET ST.
ELMWOOD PARK, NJ 07407

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3/29/04