

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001192

**FILED**  
**Aug 09, 2007**  
**Secretary of State**

**Entity Name:** NEW YORK MANAGEMENT SERVICES L.L.C.

**Current Principal Place of Business:**

28-02 171 STREET  
FLUSHING, NY 11358

**New Principal Place of Business:**

25068 EAST COLONIAL DRIVE  
CHRISTMAS, FL 32709

**Current Mailing Address:**

28-02 171 STREET  
FLUSHING, NY 11358

**New Mailing Address:**

P. O. BOX 1083  
CHRISTMAS, FL 32709

**FEI Number:** 61-1406472      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DIORIO, MARCO  
20655 NEWBY STREET  
ORLANDO, FL 32833    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:           ROBERTI, JOHN  
Address:        28-02 171 STREET  
City-St-Zip:    FLUSHING, NY 11358

**ADDITIONS/CHANGES:**

Title:            MGRM      (X) Change ( ) Addition  
Name:           ROBERTI, JOHN  
Address:        P. O. BOX 1083  
City-St-Zip:    CHRISTMAS, FL 32709

I hereby certify that the information supplied with this filing does not qualify 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: JOHN ROBERTI

MGRM

08/09/2007

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