

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000413

FILED
Feb 18, 2005
Secretary of State

Entity Name: PREMIUM SERVICES MANAGEMENT, LLC

Current Principal Place of Business:

3465 N. DESERT DR., #222
ATLANTA, GA 30344

New Principal Place of Business:

Current Mailing Address:

3465 N. DESERT DR., #222
ATLANTA, GA 30344

New Mailing Address:

FEI Number: 58-2259104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: GOLDEN, LEONARD
Address: 3465 N. DESERT DR., #222
City-St-Zip: ATLANTA, GA 30344

Title: MGRM () Delete
Name: GOLDEN, JANICE
Address: 3465 N. DESERT DR., #222
City-St-Zip: ATLANTA, GA 30344

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: ALBERT, JOHNSON III
Address: 3465 N. DESERT DR., 222
City-St-Zip: ATLANTA, GA 30344

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: KISMA STEPHENSON

MGR

02/18/2005

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