

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095302

FILED
Feb 02, 2007
Secretary of State

Entity Name: SERVICIOS MULTIPLES PPR, LLC

Current Principal Place of Business:

5454 HOFFNER AVE
SUITE 106
ORLANDO, FL 32812

New Principal Place of Business:

1106 W OAK ST
SUITE C
KISSIMMEE, FL 34741

Current Mailing Address:

5454 HOFFNER AVE
SUITE 106
ORLANDO, FL 32812

New Mailing Address:

1106 W OAK ST
SUITE C
KISSIMMEE, FL 34741

FEI Number: 20-5631568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, ISMAEL
4975 WARRIOR LANE
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

PEREZ, ISMAEL
4709 HARDY MILLS ST
KISSIMMEE, FL 34758 US

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: ISMAEL PEREZ

02/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PEREZ, ISMAEL
Address: 4975 WARRIOR LANE
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM (X) Delete
Name: FREITAS ACCOUNTING,, TAX SERVICES & CO.
Address: 5454 HOFFNER AVE, SUITE 105
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PEREZ, ISMAEL
Address: 4709 HARDY MILLS ST
City-St-Zip: KISSIMMEE, FL 34758

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 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: ISMAEL PEREZ

MGR

02/02/2007

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