

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000005904

**Entity Name:** CPS CONTRACTORS, LLC

**Current Principal Place of Business:**

2200 SOUTH DIXIE HWY  
SUITE # 701  
MIAMI, FL 33133

**Current Mailing Address:**

P.O. BOX 330429  
MIAMI, FL 33133

**FEI Number:** 20-3205208

**Certificate of Status Desired:** No

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

SCHAFFER, CRAIG I  
2200 SOUTH DIXIE HWY  
SUITE # 701  
MIAMI, FL 33133 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SCHAFFER, CRAIG IMGR  
Address 2200 S. DIXIE HIGHWAY, SUITE #701  
City-State-Zip: MIAMI FL 33133

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CRAIG SCHAFFER

MGRM

03/28/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date