

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000090987

**Entity Name:** EXECUTIVE & PROFESSIONAL MANAGEMENT SERVICES, LLC**Current Principal Place of Business:**100 SOUTH BISCAYNE BLVD., SUITE 900  
MIAMI, FL 33131**Current Mailing Address:**100 SOUTH BISCAYNE BLVD., SUITE 900  
MIAMI, FL 33131**FEI Number:** 20-2038504**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLLO, JEROME  
100 SOUTH BISCAYNE BLVD., SUITE 900  
MIAMI, FL 33131 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 MGR  
Name HOLLO, TIBOR  
Address 100 SOUTH BISCAYNE BLVD., SUITE 900  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name HOLLO, JEROME  
Address 100 S BISCAYNE BLVD STE 900  
City-State-Zip: MIAMI FL 33131

Title MANAGER  
Name DAHNA, PHILIP  
Address 100 SOUTH BISCAYNE BLVD., SUITE 900  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name HOLLO, WAYNE  
Address 100 S BISCAYNE BLVD STE 900  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name KATZ, LEONARD  
Address 100 S BISCAYNE BLVD STE 900  
City-State-Zip: MIAMI FL 33131

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LEONARD KATZ

MANAGER

02/13/2017

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