2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 02, 2007
Secretary of State

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Entity Name: PROTECH OFFICE SOLUTIONS, LLC

Current Principal Place of Business:

1185 IMMOKALEE ROAD
SUITE 110
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

1185 IMMOKALEE ROAD
SUITE 110
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 20-2260405 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICI, JAMES R
1185 IMMOKALEE RD.
SUITE 110
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

NICI, JAMES R ESQ.
C/O COX & NICI
1185 IMMOKALEE RD., SUITE 110
NAPLES, FL 34110 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: JAMES R. NICI 01/02/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: NICI, JAMES R
Address: 1185 IMMOKALEE RD STE 110
City-St-Zip: NAPLES, FL 34103 US

Title: PVST ( ) Delete
Name: NICI, JAMES R
Address: 1185 IMMOKALEE RD STE 110
City-St-Zip: NAPLES, FL 34103 US

ADDITIONS/CHANGES:

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

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: JAMES R. NICI MGR 01/02/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date