

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000031914

1. Entity Name
PROFESSIONAL & TRADE SERVICES, LLC



Principal Place of Business
**16463 NE 6 AVE
N MIAMI BEACH, FL 33162**

Mailing Address
**16463 NE 6 AVE
N MIAMI BEACH, FL 33162**



04072004No Chg-LLC

CR2E083 (10/03)

4. FEI Number
37-1450413

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROSOV, EUGENE A
5981 NE 6TH AVENUE
MIAMI, FL 33137**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and the filer

NOTE: Registered Agent signature required when changing

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

U000000109155
04/12/04-80032-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	AUGUSTINE, JEAN J
STREET ADDRESS	16463 NE 6 AVE
CITY-STATE-ZIP	N MIAMI BEACH, FL 33162
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify 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 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: JEAN JOSEPH AUGUSTIN

4.7.04

3059812171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DATE

Daytime Phone