## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L03000011865

1. Entity Name

PINPOINT SUBSURFACE AND UTILITY LOCATIONS, LLC



Principal Place of Business

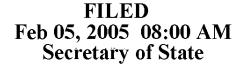
1000 WEST MCNAB ROAD

POMPANO BEACH, FL 33069

Mailing Address

1000 WEST MCNAB ROAD 200

POMPANO BEACH, FL 33069





01262005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0366907

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

SMITH, STEPHEN C 1000 WEST MCNAB ROAD

POMPANO BEACH, FL 33069

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

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstaling)

DATE

Filing Fee is \$50.00 Due by May 1, 2005

H00000216840 02/05/05-80057-013 55.00

MANAGING MEMBERS/MANAGERS
MGRM
SMITH, STEPHEN C
1000 WEST MCNAB ROAD
POMPANO BEACH, FL 33069
MGRM
LOPEZ, ALAN
1000 WEST MCNAB ROAD
POMPANO BEACH, FL 33069

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11. I hereby certify that the inform indicated on this report is true limited liability company or the with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 stee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

CITY-ST-ZIP

STEPHEN C.

1-27-05

-782 - 8222

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

Daytime Phone #