

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04-26-2005 MAY 11 AM 9:02

DOCUMENT # L03000025915

1. Entity Name
USA WORK PERMITS, LLC



Principal Place of Business
3223 NW 10TH TERR, STE 610
FORT LAUDERDALE, FL 33309

Mailing Address
3223 NW 10TH TERR, STE 610
FORT LAUDERDALE, FL 33309

20047833



04182005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0736691

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

USA WORK PERMITS, LLC
3223 N.W. 10TH TERRACE, SUITE 610
FORT LAUDERDALE, FL 33309

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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 Florida. 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 resigning

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DPS
PARENTEAU, RICHARD SR
3223 NW 10TH TERRACE
FORT LAUDERDALE, FL 33309

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: _____

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

Richard Parenteau Sr, President
April 19, 2005 - Tel.: 1-800-613-0656

Date

Office Phone