

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030306

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: CONTINENTAL NETWORK SERVICES LLC

## Current Principal Place of Business:

12539 CRAYFORD AVE.  
ORLANDO, FL 32837

## New Principal Place of Business:

## Current Mailing Address:

12539 CRAYFORD AVE.  
ORLANDO, FL 32837

## New Mailing Address:

P.O. BOX 772365  
ORLANDO, FL 32877

FEI Number: 20-0930556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARIENTE, EDMUNDO  
12539 CRAYFORD AVE.  
ORLANDO, FL 32837 US

## Name and Address of New Registered Agent:

PARIENTE, EDMUNDO CEO  
12539 CRAYFORD AVE.  
ORLANDO, FL 32837 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: EDMUNDO PARIENTE

04/29/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PARIENTE, MARIA DORENA P  
Address: 12539 CRAYFORD AVE.  
City-St-Zip: ORLANDO, FL 32837

Title: MGR ( ) Delete  
Name: BOZOVICH-PARIENTE, MARIA O  
Address: 12539 CRAYFORD AVE.  
City-St-Zip: ORLANDO, FL 32837

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PARIENTE, MARIA D  
Address: 12539 CRAYFORD AVE.  
City-St-Zip: ORLANDO, FL 32837

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

Title: MGR ( ) Change (X) Addition  
Name: PARIENTE, MARIELLA  
Address: 12539 CRAYFORD AVE.  
City-St-Zip: ORLANDO, FL 32837

Title: MGR ( ) Change (X) Addition  
Name: PARIENTE, ANA K  
Address: 12539 CRAYFORD AVE.  
City-St-Zip: ORLANDO, FL 32837

Title: MGR ( ) Change (X) Addition  
Name: PARIENTE, CESAR R  
Address: 12539 CRAYFORD AVE.  
City-St-Zip: ORLANDO, FL 32837

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: MARIA D. PARIENTE

MGR

04/29/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date