


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000043898 1. Entity Name PERMANENT SERVICES, LLC	
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Principal Place of Business 21050 N.E. 38TH AVE SUITE 403 ATLANTIC 3 AVENTURA, FL 33180	Mailing Address 21050 N.E. 38TH AVE SUITE 403 ATLANTIC 3 AVENTURA, FL 33180
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02152005No Chg-LLC CR2E083 (10/03)

4. FEI Number 68-0573190	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MANRIQUE, GUILLERMO
21050 N.E. 38TH AVE
SUITE 403 ATLANTIC 3
AVENTURA, FL 33180

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MANRIQUE, GUILLERMO MR 21050 N.E. 38TH AVE SUITE 403 ATLANTIC 3 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERDOMO, ROCIO MS 21050 N.E. 38TH AVE SUITE 403 ATLANTIC 3 AVENTURA, FL 33180
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03/17/05-80058-005 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 Date Daytime Phone #