

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013063

Entity Name: P & P FRANCHISING, L.L.C.

**FILED**  
**Apr 22, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

4890 W. KENNEDY BLVD.  
SUITE 900  
TAMPA, FL 33609 US

**New Principal Place of Business:**

**Current Mailing Address:**

4890 W. KENNEDY BLVD.  
SUITE 900  
TAMPA, FL 33609 US

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SMITH, KAREN R  
4890 W. KENNEDY BLVD.  
SUITE 900  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

SHARP, WILLIAM M  
4890 W. KENNEDY BLVD.  
SUITE 900  
TAMPA, FL 33609 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: WILLIAM M. SHARP

04/22/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: PEREZ, NICOLE  
Address: 4890 W. KENNEDY BLVD., SUITE 900  
City-St-Zip: TAMPA, FL 33548 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NICOLE PEREZ

MGR

04/22/2005

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