

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048777

Entity Name: 3P NET SOLUTIONS LLC

FILED  
May 08, 2007  
Secretary of State

## Current Principal Place of Business:

1761 W. HILLSBORO BLVD.  
SUITE 401  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

## Current Mailing Address:

1761 W. HILLSBORO BLVD.  
SUITE 401  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

FEI Number: 20-2239665      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

D'AGOSTINO, DINO  
1761 W. HILLSBORO BLVD.  
SUITE 401  
DEERFIELD BEACH, FL 33442 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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: D'AGOSTINO, DINO  
Address: 1761 W. HILLSBORO BLVD.  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGR ( ) Delete  
Name: ARMIRAGLIO, MASSIMO  
Address: 10890 HAYDN DR.  
City-St-Zip: BOCA RATON, FL 33498

## ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: DINO D'AGISTINO

MGR

05/08/2007

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