## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUI 1. Entity Name PRO TEC		1729		U/L	Secretary of Sta
Principal Place	e of Business	Mailing Address			
1351 AMBER PALM BAY, F		1351 AMBERG AVE. N.W. PALM BAY, FL 32907			
	O NOT WRITE		ne.	01132008No Chg-LLC	CR2E083 (12/07)
	ONO WRITE	INTINIO SPA	CE	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
				5. Certificate of Status Desired	\$5.00 Additional Fee Required
SAGLINBENE, CHARLES JR 1351 AMBERG AVENUE NW PALM BAY, FL 32907  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					
	named entity submitte this statement in ions of registered egent.  Signature, typed or printed name of registered agent.		ed office or register		OATE
FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					
9.	MANAGING MEMB	ERS/MANAGERS			
TITLE NAME	SAGLINBENE, CHARLES JR		San Ag		
STREET ADDRESS CITY-ST-ZIP	1351 AMBERG AVENUE NW PALM BAY, FL 32907			01/31/08	0800267 1280010-017 138 75
TITLE		• • • • • • • • • • • • • • • • • • • •			
NAME Street adoress					
CITY-ST-ZIP					
TITLE			1436.043		

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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: Later Many of Specific Managing Members, or Authorized Representative

NAME STREET ADDRESS CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-S1-ZIP

1/23/08 321-960-0532