

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078803

Entity Name: 3 P'S INVESTMENTS, LLC.

FILED
Feb 15, 2008
Secretary of State

Current Principal Place of Business:

10 NW LE JEUNE RD
STE 500
MIAMI, FL 33126

New Principal Place of Business:

12650 NW S RIVER DRIVE
MEDLEY, FL 33178

Current Mailing Address:

10 NW LE JEUNE RD
STE 500
MIAMI, FL 33126

New Mailing Address:

12650 NW S RIVER DRIVE
MEDLEY, FL 33178

FEI Number: 20-1869618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESQUIRE CORPORATE SERVICES, INC.
10 NW LE JEUNE RD
STE 500
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

POU, GABRIEL A SR
12650 NW S RIVER DRIVE
MEDLEY, FL 33178 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: GABRIEL POU

02/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POU, GABRIEL A
Address: 10 NE LE JEUNE RD STE 500
City-St-Zip: MIAMI, FL 33126

Title: MGRM () Delete
Name: POU, GABRIEL H
Address: 10 NW LE JEUNE RD STE 500
City-St-Zip: MIAMI, FL 33126

Title: MGRM () Delete
Name: POU, ANTONIO
Address: 10 NW LE JEUNE RD STE 500
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POU, GABRIEL A
Address: 12650 NW S RIVER DRIVE
City-St-Zip: MEDLEY, FL 33178

Title: MGRM (X) Change () Addition
Name: POU, GABRIEL H
Address: 12650 NW S RIVER DRIVE
City-St-Zip: MEDLEY, FL 33178

Title: MGRM (X) Change () Addition
Name: POU, ANTONIO
Address: 12650 NW S RIVER DRIVE
City-St-Zip: MEDLEY, FL 33178

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: GABRIEL POU

MGRM

02/15/2008

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