
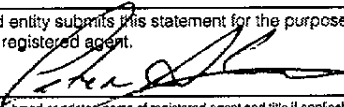
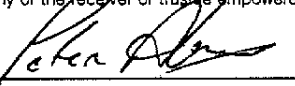


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000089401		
1. Entity Name PRECISION MANAGEMENT SERVICES, LLC		
Principal Place of Business 14963 S.W. 60TH STREET MIAMI, FL 33126	Mailing Address 14963 S.W. 60TH STREET MIAMI, FL 33126	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ESPINOSA, PATRICIA O ESQ 815 N.W. 57TH AVENUE, STE. 405 MIAMI, FL 33126		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: 2-1-2006		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM ABREU, PETER P 14963 S.W. 60TH STREET MIAMI, FL 33126	
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11. I hereby certify that the information supplied with this filing 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:  PETER ABREU 2-1-2006 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #		



02022006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-2035795

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

L100000423491
02/18/06-80009-025 50.00