2005-LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Aug 01, 2005 8:00 am Secretary of State DOCUMENT # L04000091534 1. Entity Name 08-01-2005 90091 042 ****50.00 FIRST CHOICE INVESTMENT SERVICES, LLC Principal Place of Business Mailing Address 2547 SAWYER TERRACE WELLINGTON FL 33414 2547 SAWYER TERRACE WELLINGTON FL 33414 Mailing Address 2. Principal Place of Business 477 S- Rosenbry Ave Samo Suite, Apt. #, etc. 2nd MOORE CR2E083 (5/05) 208 City & State City & State 4. FEI Number Applied For West Palm Beach 2023 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FEDER, GARY A Street Address (P.O. Box Number is Not Acceptable) 2125 NORTH COMMERCE PARKWAY WESTON FL 33326 Zip Code FI 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, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 7, 2005 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE **MGRM** ☐ Delete TITLE ☐ Change ☐ Addition ZIMMERMAN, RICHARD NAME NAME STREET ADDRESS 2547 SAWYER TERRACE STREET ADDRESS CITY-ST-7IP WELLINGTON FL 33414 CITY-ST-ZIP THLE MGRM ☐ Delete TITLE ☐ Change Addition | PALERMO, DEBORAH NAME NAME STREET ADDRESS 384 MOHAWK LANE STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP CITY-ST-7IP TOTLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify 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 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.

RICHARD ZIMMERMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURÉ:

FILED