

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000041441

FILED
Sep 01, 2006
Secretary of State

Entity Name: STRATEGIC SERVICES U.S.A., LLC

Current Principal Place of Business:

6831 LOYAL ORCHID CIRCLE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

6831 LOYAL ORCHID CIRCLE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., SUITE 101
TALLAHASSEE, FL 323012960 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: KATZ, ROBERT
Address: 6831 LOYAL ORCHID CIRCLE
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGRM (X) Delete
Name: WILLIAMSON, CARL
Address: 6831 LOYAL ORCHID CIRCLE
City-St-Zip: DELRAY BEACH, FL 33446

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 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: ROBERT KATZ

PRES

09/01/2006

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