

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000018905

FILED
May 14, 2008
Secretary of State

Entity Name: PROMOTION SERVICES, LLC.

Current Principal Place of Business:

6977 ALOMA AVE. #140
WINTER PARK, FL 32792

New Principal Place of Business:

106 SCOTTSDALE SQ.
WINTER PARK, FL 32792

Current Mailing Address:

106 SCOTTSDALE SQUARE
WINTER PARK, FL 32792

New Mailing Address:

106 SCOTTSDALE SQ.
WINTER PARK, FL 32792

FEI Number: 20-4703959 FEI Number Applied For () 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:

WEEKS, KASONDRA
106 SCOTTSDALE SQUARE
WINTER PARK, FL 32792 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: WEEKS, KASONDRA
Address: 106 SCOTTSDALE SQUARE
City-St-Zip: WINTER PARK, FL 32792

Title: MGRM () Delete
Name: FORD, JEROME
Address: 6977 ALOMA AVE., #140
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: FORD, JEROME
Address: 106 SCOTTSDALE SQ.
City-St-Zip: WINTER PARK, FL 32792

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: KASONDRA WEEKS

MGRM

05/14/2008

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