

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056816

FILED
Jun 23, 2007
Secretary of State

Entity Name: NATIONAL PETROLEUM SERVICES, LLC

Current Principal Place of Business:

9280 HERON COVE DRIVE
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

9280 HERON COVE DRIVE
WEST PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CARMELO MANGIAFICO
1830 S.OCEAN DRIVE
APT.3909
HALLANDALE BEACH, FL 33009 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: CARMELO MANGIAFICO

06/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MANGIAFICO, GIANCARLO
Address: 9280 HERON COVE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM () Delete
Name: MANGIAFICO, LILIANA
Address: 45 LELAND FARM ROAD
City-St-Zip: ASHLAND, MA 01721 US

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 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: LILIANA MANGIAFICO

MGRM

06/23/2007

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