

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016017

FILED
Mar 03, 2009
Secretary of State

Entity Name: PROCORP DEBT SOLUTIONS, LLC

Current Principal Place of Business:

700 WEST HILLSBORO BLVD, STE 101
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

16259 BRISTOL POINTE DRIVE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 26-1964068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVALLE, BROWN, RONAN & MULLINS, P.A
750 DIXIE HIGHWAY
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: GARBOWIT, KEVIN
Address: 16259 BRISTOL POINTE DRIVE
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGRM () Delete
Name: BROOKE, PETER
Address: 6608 NW 42ND WAY
City-St-Zip: BOCA RATON, FL 33496

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: KEVIN GARBOWIT

MGRM

03/03/2009

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