

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000031880

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** PROFESSIONAL STAFFING AND CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

427 S MATANZAS AVE  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

427 S MATANZAS AVE  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 45-1618634

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BYRNE, KEVIN  
427 S MATANZAS AVE  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

SANCHEZ, GIL  
210 S WESTLAND AVE  
TAMPA, FL 33606 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: GIL SANCHEZ

04/24/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BYRNE, KEVIN  
Address: 427 S MATANZAS AVE  
City-St-Zip: TAMPA, FL 33609

I hereby 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 BYRNE

MGRM

04/24/2012

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