


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90090 031 ****50.00

DOCUMENT # L98000000421	
1. Entity Name MSA - MARKETING SERVICES OF AMERICA, L.C.	

Principal Place of Business 8855 COLLINS AVENUE, STE. 1007 SURFSIDE, FL 33154	Mailing Address 8855 COLLINS AVENUE, STE. 1007 SURFSIDE, FL 33154
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20002844



01082007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0835788	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LANZA, ALBERTO A
 8855 COLLINS AVENUE, STE. 1007
 SURFSIDE, FL 33154

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LANZA, ALBERTO A 8855 COLLINS AVENUE, STE. 1007 SURFSIDE, FL 33154
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Alberto Lanza owner Date: 01/06/07 Daytime Phone #: 305-812-5554

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE