

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002060

FILED
May 07, 2004
Secretary of State

Entity Name: PRACTICAL PROFESSIONAL SERVICES, LLC

Current Principal Place of Business:

5820-B W CYPRESS ST.
TAMPA, FL 33607

New Principal Place of Business:

5820 W CYPRESS ST STE B
TAMPA, FL 33607

Current Mailing Address:

5820-B W CYPRESS ST.
TAMPA, FL 33607

New Mailing Address:

5820 W CYPRESS ST STE B
TAMPA, FL 33607

FEI Number: 59-3568808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELOS RIOS, ALEIDA
5820-B W CYPRESS ST.
TAMPA, FL 33607

Name and Address of New Registered Agent:

CRUZ, ALEIDA
5820 W CYPRESS ST STE B
TAMPA, FL 33607

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: ALEIDA CRUZ

05/07/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: DE LOS RIOS, ALEIDA
Address: 5820-B W CYPRESS ST.
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CRUZ, ALEIDA
Address: 5820 W CYPRESS ST STE B
City-St-Zip: TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEIDA CRUZ

MGR

05/07/2004

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