

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # M01000001292

1. Entity Name
CRS FACILITY SERVICES, LLC



Principal Place of Business

2 SOUTH BISACYNNE BLVD.
SUITE 205
MIAMI, FL 33131

Mailing Address

2 SOUTH BISACYNNE BLVD.
SUITE 205
MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE



04092005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
22-3695494

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MUNROE, W. BRADLEY ESQ.
239 E. VIRGINIA ST.
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	RIZZUTO, WILLIAM JR.
STREET ADDRESS	475 MARKET ST.
CITY - ST - ZIP	ELMWOOD PARK, NJ 07407
TITLE	MGRM
NAME	SCHOLZ, THOMAS
STREET ADDRESS	475 MARKET ST.
CITY - ST - ZIP	ELMWOOD PARK, NJ 07407
TITLE	MGRM
NAME	CARR, PAUL
STREET ADDRESS	475 MARKET ST.
CITY - ST - ZIP	ELMWOOD PARK, NJ 07407
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000316666
04/19/05-80084-011 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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 606, Florida Statutes.

SIGNATURE:

William Rizzuto

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

Date

Daytime Phone #

4/12/05