

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001292

Entity Name: CRS FACILITY SERVICES, LLC

FILED
May 09, 2008
Secretary of State

Current Principal Place of Business:

2 SOUTH BISACYN BLVD.
SUITE 205
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

2 SOUTH BISACYN BLVD.
SUITE 205
MIAMI, FL 33131

New Mailing Address:

FEI Number: 22-3695494 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MUNROE, W. BRADLEY ESQ.
239 E. VIRGINIA ST.
TALLAHASSEE, FL 32301 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: RIZZUTO, WILLIAM JR.
Address: 475 MARKET ST.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: MGRM () Delete
Name: SCHOLZ, THOMAS
Address: 475 MARKET ST.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: MGRM () Delete
Name: CARR, PAUL
Address: 475 MARKET ST.
City-St-Zip: ELMWOOD PARK, NJ 07407

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM RIZZUTO

MGRM

05/09/2008

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