


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 18, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000005616
 1. Entity Name
NEW YORK'S FINEST PRIVATE INVESTIGATIVE SERVICES, LLC



Principal Place of Business 329 WARREN ST. WEST BABYLON, NY 11704	Mailing Address 329 WARREN ST. WEST BABYLON, NY 11704
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DO NOT WRITE IN THIS SPACE



07092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1320623	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LUGO, THOMAS V
 1513 LAUREL DR.
 CLEARWATER, FL 33756**

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 _____ DATE **07/18/07-80006-010 50.00**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rebinding)

Filing Fee is \$50.00 Due by September 14, 2007

07/18/07-80006-009 5.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUGO, THOMAS V 1513 LAUREL DR. CLEARWATER, FL 33756
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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: *Thomas V. Lugo* **7/10/07 631-492-7151**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #