

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000149747

FILED  
Aug 29, 2008  
Secretary of State

Entity Name: L.L. PROFESSIONAL SERVICES, INC.

## Current Principal Place of Business:

7661 CURRENCY DRIVE  
ORLANDO, FL 32809 US

## New Principal Place of Business:

6900 S ORANGE BLOSSOM TRAIL  
400  
ORLANDO, FL 32809 US

## Current Mailing Address:

7661 CURRENCY DRIVE  
ORLANDO, FL 32809 US

## New Mailing Address:

6900 S ORANGE BLOSSOM TRAIL  
400  
ORLANDO, FL 32809 US

FEI Number: 86-1089610

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, LUIS F  
865 SKY LAKE CIRCLE  
A  
ORLANDO, FL 32809 US

## Name and Address of New Registered Agent:

LOPEZ, LUIS F  
6900 S ORANGE BLOSSOM TRAIL  
400  
ORLANDO, FL 32809 US

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: LUIS F. LOPEZ

08/29/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOPEZ, LUIS F  
Address: 1710 WHITE HERON BAY CIR.  
City-St-Zip: ORLANDO, FL 32824

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LOPEZ, LUIS F  
Address: 6900 S ORANGE BLOSSOM TRAIL SUITE 400  
City-St-Zip: ORLANDO, FL 32809

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS F. LOPEZ

P

08/29/2008

Electronic Signature of Signing Officer or Director

Date