## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F72538

FILED Jan 11, 2004 Secretary of State

Entity Nar	ne: EFFICIE	NT SERVICES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX ( MARGATE	63-4995 E, FL 33063	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX ( MARGATE	63-4995 E, FL 33063	US			
FEI Number:	59-2177968	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
301 E. COI FORT LAU	K, DONNA J., MMERCIAL B JDERDALE, F	LVD. <sup>-</sup> L 33334	nurness of changing its registerace	l office or registered agent, or both,	
	of Florida.	submits this statement for the	purpose of changing its registered	ronice of registered agent, or both,	
SIGNATUR					
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	COHEN, MAU 3600 N.W. 84	•	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	COHEN, GLOR 3600 N.W. 84	· · ·	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 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: MAURICE COHEN MR 01/11/2004