

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Oct 05, 2005  
Secretary of State**

DOCUMENT# P02000087832

Entity Name: EZ4U SERVICES, CORP

**Current Principal Place of Business:**

4640 NW 93 DORAL CT  
MIAMI, FL 33178 US

**New Principal Place of Business:**

**Current Mailing Address:**

4640 NW 93 DORAL CT  
MIAMI, FL 33178 US

**New Mailing Address:**

FEI Number: 56-2787372      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PILAR TOBON, ANA M  
4640 NW 93 DORAL CT  
MIAMI, FL 33178 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

**OFFICERS AND DIRECTORS:**

Title: P            (X) Delete  
Name: NEW MARKETING CORP,  
Address: 4690 NW 93 DORAL CT  
City-St-Zip: MIAMI, FL 33178

Title: V            ( ) Delete  
Name: TOBON, ANA M  
Address: 4640 NW 93 DORAL CT  
City-St-Zip: MIAMI, FL 33178

Title: D            ( ) Delete  
Name: GUALDO, ANDRES  
Address: 4640 NW 93 DORAL CT  
City-St-Zip: DORAL, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: P            (X) Change ( ) Addition  
Name: GIRALDO, ANDRES  
Address: 4640 NW 93 DORAL CT  
City-St-Zip: DORAL, FL 33178

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: ANDRES GIRALDO

P

10/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date