

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117278

**FILED**  
**May 01, 2006**  
**Secretary of State**

**Entity Name:** SERVICIOS INFORMATICOS, INC.

**Current Principal Place of Business:**

8004 NW 154TH ST., # 354  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

6601 LYONS RD  
SUITE B8  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

8004 NW 154TH ST., # 354  
MIAMI LAKES, FL 33016

**New Mailing Address:**

**FEI Number:** 11-3661447      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ZAZA, GENARO  
8004 NW 154TH ST., # 354  
MIAMI LAKES, FL 33016    US

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

ZAZA, GENNARO  
20754 CONCORD GREEN DR W  
BOCA RATON, FL 33433    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: GENNARO ZAZA

05/01/2006

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:            DP            ( ) Delete  
Name:            ZAZA, GENARO A  
Address:        8004 NW 154TH ST., # 354  
City-St-Zip:    MIAMI LAKES, FL 33016

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

Title:            DP            (X) Change ( ) Addition  
Name:            ZAZA, GENNARO A  
Address:        20754 CONCORD GREEN DR W  
City-St-Zip:    BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the 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: GENNARO ZAZA

DP

05/01/2006

Electronic Signature of Signing Officer or Director

Date