

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118712

FILED
Jul 19, 2005
Secretary of State

Entity Name: CLEVER SERVICES CORPORATION

Current Principal Place of Business:

6800 NW 39TH AVE #367
COCONUT CREEK, FL 33073

New Principal Place of Business:

1105 ALBANY AVE
LEHIGH ACRES, FL 33971

Current Mailing Address:

6800 NW 39TH AVE #367
COCONUT CREEK, FL 33073

New Mailing Address:

1105 ALBANY AVE
LEHIGH ACRES, FL 33971

FEI Number: 99-5792173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE ROAD
POMPANO BEACH, FL 33064 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

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: SILVA, FHABLO C
Address: 6800 NW 39TH AVE #367
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SILVA, FHABLO C
Address: 1105 ALBANY AVE
City-St-Zip: LEHIGH ACRES, FL 33971

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: FHABLO C SILVA

DP

07/19/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date