

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111196

Entity Name: ABSOLUTE SERVICES, INC.

FILED  
Aug 24, 2011  
Secretary of State

**Current Principal Place of Business:**

7204 PLATHE ROAD  
NEW PORT RICHEY, FL 34653

**New Principal Place of Business:**

**Current Mailing Address:**

7204 PLATHE ROAD  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

FEI Number: 36-4540970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWANSON, JASON  
7204 PLATHE ROAD  
NEW PORT RICHEY, FL 34653 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  
Name: SWANSON, JASON  
Address: 7204 PLATHE ROAD  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP  
Name: CHULLA, NANCY J  
Address: 15010 113TH AVE., LOT 13  
City-St-Zip: LARGO, FL 33774

I hereby 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 all other like empowered.

SIGNATURE: JASON SWANSON

P

08/24/2011

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

\_\_\_\_\_  
Date