

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060276

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** AMBASSADOR SERVICES INC.

**Current Principal Place of Business:**

245 CHALLENGER ROAD  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 654  
CAPE CANAVERAL, FL 32920

**New Mailing Address:**

**FEI Number:** 59-3261658

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUBERT, BRIAN  
245 CHALLENGER RD  
CAPE CANAVERAL, FL 32920 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: PS  
Name: HUBERT, BRIAN A  
Address: 245 CHALLENGER RD.  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VP  
Name: GARVER, DONALD H  
Address: 245 CHALLENGER RD.  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: MGMR  
Name: MAY, RANDALL  
Address: 245 CHALLENGER ROAD  
City-St-Zip: CAPE CANAVERAL, FL 32920

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: BRIAN HUBERT

PS

03/21/2012

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

\_\_\_\_\_ Date