

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000021707

Entity Name: COMPLETE SERVICES ALLIANCE INC

Current Principal Place of Business:

6835 SPRING RAIN DRIVE
ORLANDO, FL 32819

Current Mailing Address:

1926 N JOHN YOUNG PKWY PMB 121
KISSIMMEE, FL 34741 US

FEI Number: 45-4718245

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRASS TAX INC
1522 N JOHN YOUNG PKWY
KISSIMMEE, FL 34741 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ASHMORE, AMANDA
Address 6835 SPRING RAIN DRIVE
City-State-Zip: ORLANDO FL 32819

Title VP
Name MCTAVOUS, CARLEEN
Address PO BOX 590212
City-State-Zip: ORLANDO FL 32859

Title VP
Name JAWAHIR, NALINI
Address 759 WINDROSE DRIVE
City-State-Zip: ORLANDO FL 32824

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: NALINI JAWAHIR

VP

01/18/2013

Electronic Signature of Signing Officer/Director Detail

Date