2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519949

Entity Name: TOYOSERVICE, INC.

FILED May 02, 2005 Secretary of State

4097 PALM AVENUE 4097 PALM AVENUE HIALEAH, FL 33012 HIALEAH, FL 33012 US

Current Mailing Address: New Mailing Address:

4097 PALM AVENUE 4097 PALM AVENUE HIALEAH, FL 33012 HIALEAH, FL 33012 US

FEI Number: 59-1943347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHEVEZ, MARIANO 16421 NW 49 ST. HIALEAH, FL 33013 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

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:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CHEVEZ, MARIANO M Name: Name: CHEVEZ, MARIANO M 16421 NW 45 AVE 16421 NW 45 AVE Address: Address: City-St-Zip: MIAMI, FL 33054 City-St-Zip: MIAMI, FL 33054 US

Title: SD Title: SD () Delete (X) Change () Addition Name:

CHEVEZ, MARI E Name: CHEVEZ, MARI E 16421 NW 45 AVE 16421 NW 45 AVE Address: MIAMI, FL 33054 MIAMI, FL 33054 US City-St-Zip: City-St-Zip:

() Delete Title: Title: PD PD (X) Change () Addition

GARCIA, GLADYS Name: GARCIA, GLADYS Name: 1010 E 49 ST 1010 E 49 ST Address: Address:

City-St-Zip: HIALEAH, FL 33013 City-St-Zip: HIALEAH, FL 33013 US

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: MARIANO CHEVEZ D 05/02/2005