


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90174 027 \*\*\*150.00

<b>DOCUMENT # 534359</b>	
1. Entity Name FIRST PROPERTY SERVICES, INC.	

Principal Place of Business 8325 S.W. 56TH STREET P.O. BOX 557157 MIAMI, FL 33155	Mailing Address 8325 S.W. 56TH STREET P.O. BOX 557157 MIAMI, FL 33155
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**DO NOT WRITE IN THIS SPACE**

01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1748378	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  PRINZ, EUGENE A. 8325 S.W. 56TH STREET MIAMI, FL 33155
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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature of the registered agent or the registered office agent, or both, in the State of Florida.

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PST PRINZ, EUGENE A. 8325 SW 56 ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	VP PRINZ, ELAINE K 8325 SW 56 ST. MIAMI, FL 33155
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11; changed, or on an attachment with an address, with a power of attorney, or otherwise empowered.

**SIGNATURE:** Elaine K. Prinz ELAINE K. PRINZ VP 4-20-07 305-279-0909  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR