

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 620768

FILED
Jan 30, 2004
Secretary of State

Entity Name: SERVINVEST CORP.

Current Principal Place of Business:

691 W 64TH DRIVE HIALEAH, FL 33012
PO BOX 66-1094
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

691 W 64TH DRIVE
HIALEAH, FL 33012

Current Mailing Address:

691 W 64TH DRIVE HIALEAH, FL 33012
PO BOX 66-1094
MIAMI SPRINGS, FL 33166

New Mailing Address:

691 W 64TH DR., HIALEAH, FL 33012
PO BOX 66-1094
MIAMI SPRINGS, FL 332661094

FEI Number: 59-1910021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRENE ESTHER ACUNA
691 W. 64TH DRIVE
HIALEAH, FL 33012

Name and Address of New Registered Agent:

ACUNA, IRENE E
691 W. 64TH DRIVE
HIALEAH, FL 33012

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: IRENE E. ACUNA

01/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VS () Delete
Name: ACUNA, ROBERTO,
Address: 691 W. 64TH DRIVE
City-St-Zip: HIALEAH, FL

Title: PD () Delete
Name: ACUNA, IRENE ESTHER,
Address: 691 W. 64TH DRIVE
City-St-Zip: HIALEAH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VS (X) Change () Addition
Name: ACUNA, ROBERTO VS
Address: 691 W. 64TH DRIVE
City-St-Zip: HIALEAH, FL 33012

Title: PD (X) Change () Addition
Name: ACUNA, IRENE E PD
Address: 691 W. 64TH DRIVE
City-St-Zip: HIALEAH, FL

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: ROBERTO ACUNA

VP

01/30/2004

Electronic Signature of Signing Officer or Director

Date