2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2007 8:00 am Secretary of State

DOCUMENT # F03000002178 1. Entity Name AUTOMATIC REFRESHMENT SERVICES, INC.						05-02-2007	-		
Principal Plac 662 MALVER REHOBETH,	RN RD	Mailing Address 662 MALVERN RD REHOBETH, AL 36301		•	1.18111111 42 U			dinna linii kenna lili	.'
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3.53 3 3 4 4 5 5 3 3 5 5 5 5 5 5 5 5 5 5 5			ird au)					
Quite		Quite 1			04242007	Chg-P	CR2E	034 (12/06)	
City & State	han al	City & State Dotton	, al		4. FEI Number 63-120			1 i	plied For t Applicable
^{Zip} 363	O Country Jauston 6. Name and Address of Current I	Zip 36301	Country Jausi	Town	<u> </u>	of Status Desired	卢	\$8.75 Add Fee Required	
		Name		7. Name and	Address of New R	egisteret	ı Ağent		
BENTLEY, FRED 448 EVERETT RD GRACEVILLE, FL 32440				Street Address (P.O. Box Number is Not Acceptable)					
			City				F	Zip Code	3
	named entity submits this statement for	registered office of	r register	ed agent, or bo	th, in the State of Flo			and accept	
the obligations of registered agent. SIGNATURE									
SIGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable. (NOT)	E: Registered Agent signs	ture required	when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campa Trust Fund Cont			.00 May Be ed to Fees				į
10.	- OFFICERS AND I		11.		ADDITIONS	CHANGES TO OFF	ICERS AN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BENTLEY, FRED 948 EVERETT RD GRACEVILLE, FL 32440	Delete	NAME STREET ADDRESS CITY-S1-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
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 if changed, or on an attachment with an address, with all other like approvered.									