

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003332

Entity Name: INTOWN SERVICES CORP.

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

2727 PACES FERRY ROAD  
SUITE 2-1200  
ATLANTA, GA 30339

## New Principal Place of Business:

## Current Mailing Address:

2727 PACES FERRY ROAD  
SUITE 2-1200  
ATLANTA, GA 30339

## New Mailing Address:

FEI Number: 26-3000678

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MANGALJI, MAJID  
Address: 5847 SAN FELIPE #4650  
City-St-Zip: HOUSTON, TX 77057

Title: VD ( ) Delete  
Name: MANGALJI, FEREEED  
Address: 5847 SAN FELIPE #4650  
City-St-Zip: HOUSTON, TX 77057

Title: SD ( ) Delete  
Name: WEINSTEIN, DAVID  
Address: 450 PARK AVENUE #1203  
City-St-Zip: NEW YORK, NY 10022

Title: CFO (X) Delete  
Name: CASSEL, DENNIS  
Address: 540 LAKE MEDLOCK DRIVE  
City-St-Zip: ALPHARETTA, GA 30022

Title: AS (X) Delete  
Name: THOWFEEL, MOHAMED  
Address: 2426 FALLEN BRANCH DRIVE  
City-St-Zip: KATY, TX 77494

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: KLINGER, MICHAEL  
Address: 141 GODFREY RD.  
City-St-Zip: WESTON, CT 06883

Title: VP (X) Change ( ) Addition  
Name: GRIFFITH, SCOTT  
Address: 2905 SEVEN PINES LN. #102  
City-St-Zip: ATLANTA, GA 30339

Title: SEC (X) Change ( ) Addition  
Name: CASSEL, DENNIS  
Address: 6142 NARCISSA PLACE  
City-St-Zip: DULUTH, GA 30097

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TEKERRA YOUNG

Electronic Signature of Signing Officer or Director

TAX

04/21/2009

Date