FOR PROFIT CORPORATION ANNUAL REPORT

For Office Use Only

DO NOT WRITE IN THIS SPACE

FILED

2011 JUL -8 PM 1:56

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F08000003671

1. Entity Name

A1 PARKING SERVICES Inc.

DO NOT WRITE IN THIS SPACE

CR2E034B (1/11)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
495 Peachtree St	626 S. 28th Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Atlanta	
City & State: Georgia	City & State: Hollywood Florida
Zip: 30308 Country: U.S.A	Zip: 33020 Country: U.S.A

4. FEI Number: 20-4967699 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Melissa Brennan

Street Address (P.O. Box Number Is Not Acceptable): 626 S 28th Ave

City: Hollywood FL Zip Code: 33020

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: M Brennan Melissa Brennan President 06/20/11
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re instating) DATE

January 1 - May 1, Fee Is $150.00
After May 1, Fee Is $550.00
Amended AR Is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

E-mail Address: ValetQa1parkingservices.com
E-mail address to be used for future annual report notices.

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Melissa Brennan
STREET ADDRESS	626 S 28 AVE
CITY-ST-ZIP	Hollywood, Fl 33020
TITLE	Vice President
NAME	Delfina Estrada
STREET ADDRESS	626 S 28 AVE
CITY-ST-ZIP	Hollywood, Fl 33020
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

700207375437
05/09/11--01009--019 **150.00

DO NOT WRITE IN THIS SPACE

7/8/11

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 on an attachment with an address, with all other like empowered. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155 F.S.