

FILED
Feb 15, 2008 08:00 AM
Secretary of State



ACCOUNTING SERVICES AT PENSACOLA, INC.

Mailing Address

2911 E. CERVANTES STREET
PENSACOLA FL 32503-6418
US

3. Mailing Address

Sole, Apt. #, e.c.

City & State

Country

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of authorized agent and title (applicatio

NOTE: FERTILIZED AGGREGATE MUST BE RETURNED TO THE SUPPLIER BY THE DATE SPECIFIED ON THE LABEL.

DATE _____

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Depth

136

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114

[illegible]

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

U00000828952
02/26/08-80022-009 150.00

☐ Change ☐ Addition☐ Change ☐ Addition

☐ Abstract ☐ Full Paper

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Geo

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