2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H61981

Address:

City-St-Zip:

16111 SW 102 AVE

MIAMI, FL

Entity Name: A. C. T. SERVICES, INC.

FILED Jan 09, 2008 Secretary of State

		SERVICEO, IIVO.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6157 N. W. UNIT F-1 HIALEAH, I	. 167TH STRE	EET US			
			Navy Mailing Adduse		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
6157 N. W. 167TH STREET UNIT F-1 HIALEAH, FL 33015			6157 N. W. 167TH STREET UNIT F-1 HIALEAH, FL 33015 US		
FEI Number:	59-2561674	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	N, WOOLTOI 102 AVENUE 33157 US				
The above in the State		submits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ager	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GOLDING, DE	7TH STREET, UNIT F-1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LAKE, RICHAR	7TH STREET, UNIT F-1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (ANDERSON, V) Delete /OOLTON E.	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DERRICK B. GOLDING PD 01/09/2008