2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41991

Title:

Name:

Address:

City-St-Zip:

2VP

BIRD, MICHAEL D

18105 MARVIN AVE

() Delete

PORT SAINT JOE, FL 32456

FILED Apr 13, 2005 Secretary of State

Entity Nam	1e: MATINCHE	ECK AT YOUR SERVICE, INC.		,
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
1032 N. 15 ⁻ MEXICO BE	TH ST. EACH, FL 3241	0 US		
Current Mailing Address:		New Mailing Address:		
P.O. BOX 1 MEXICO BE	3594 NA EACH, FL 3241	0 US		
FEI Number:	59-2745064	FEI Number Applied For () FEI N	lumber Not Applicable()	Certificate of Status Desired ()
Name and	Address of Cu	rrent Registered Agent:	Name and Address of	of New Registered Agent:
MATINCHECK, JANE 204 ALABAMA DR MEXICO BCH, FL 32410 US			MATINCHECK, BEVERLY J 514 N 15TH STREET MEXICO BCH, FL 32410 US	
The above in the State	named entity su	bmits this statement for the purpose	of changing its registere	ed office or registered agent, or both,
iii tiic Otate	or riorida.			
		J MATINCHECK		04/13/2005
	E: BEVERLY	J MATINCHECK Signature of Registered Agent		04/13/2005 Date
SIGNATUR	EIE: BEVERLY			
SIGNATUR	EIE: BEVERLY	Signature of Registered Agent Frust Fund Contribution ().	ADDITIONS/CHANG	
SIGNATUR	Electronic paign Financing 1 AND DIRECTO	Signature of Registered Agent Frust Fund Contribution (). ORS: Delete FEPHEN, P.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date
SIGNATUR Election Cam OFFICERS Title: Name: Address:	E: BEVERLY DESCRIPTION OF THE PROPERTY OF THE	e Signature of Registered Agent Frust Fund Contribution (). ORS: Delete FEPHEN, P. R FL Delete NDREW, REET	Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:
SIGNATUR Election Cam OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	EE: BEVERLY CELECTION OF THE PROPERTY OF THE P	e Signature of Registered Agent Frust Fund Contribution (). ORS: Delete TEPHEN, P. R FL Delete NDREW, REET FL Delete TEPHEN, III REET	Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN P MATINCHECK P 04/13/2005

() Change () Addition