

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90024 041 ****70.00

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1. Entity Name
CENTRAL ORGANIZATION FOR SERVICES, INC.



Principal Place of Business

4303 FAWN CIRCLE
TAMPA, FL 33610

Mailing Address

4303 FAWN CIRCLE
TAMPA, FL 33610

40040684



DO NOT WRITE IN THIS SPACE

02262007 No Chg-NP

CR2E037 (4/06)

4. FEI Number
57-1162119

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145

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IN THIS SPACE**

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 FRANCOIS PARDIEU Francois Pardieu 3/13/007
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	JACQUES, SERGE
STREET ADDRESS	4303 FAWN CIRCLE
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	DVPT
NAME	PARDIEU, FRANCOIS
STREET ADDRESS	4303 FAWN CIRCLE
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	DS
NAME	SIMMONS, YOLANDA
STREET ADDRESS	16808 HAMERRIDGE PLACE
CITY-ST-ZIP	LITHIA, FL 33547
TITLE	DP
NAME	FRANCOIS PARDIEU
STREET ADDRESS	4303 FAWN CR TAMPA, FL 33610
CITY-ST-ZIP	
TITLE	DS
NAME	SIMMONS YOLANDA
STREET ADDRESS	16808 HAMERRIDGE PLACE
CITY-ST-ZIP	LITHIA FL 33547
TITLE	DVPT
NAME	JEAN LUBIN
STREET ADDRESS	7841 SYCAMORE DR
CITY-ST-ZIP	NEW PORT RICHEY FL 34654

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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Francois Pardieu
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/007
Date

Daytime Phone #