2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P00000101349 1. Entity Name FINANCIAL ALLIANCE SERVICES INC.



Principal Place of Business

7021 CONSTITUTION BOULEVARD UNIT 5

FORT MYERS, FL 33812-5800

Mailing Address

7021 CONSTITUTION BOULEVARD

UNIT 5

DO NOT WRITE IN THIS SPACE

FORT MYERS, FL 33812-5800

FILED Feb 27, 2007 8:00 am Secretary of State

02-27-2007 90004 020 ***150.00

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No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1054685 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and Address of Current Registered Agent

CARAVELLO, MARY

7021 CONSTITUTION BOULEVARD

UNIT 5

FORT MYERS, FL 39812-5800-

of the corporation or the receiver or true changed, or on an attachment with an

33967 58CO

DO	NOT	WRITE
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 Signature, typed of offinited name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS	<u> </u>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST CARAVELLO, MARY 7021 CONSTITUTION BOULEVARD FORT MYERS, FL 838125800 33	967-5fw						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filling 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 Block 11 if								