2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000101606

1. Entity Name
COMPUTERS ALL SERVICES, CORP.

Principal Place of Business	Mailing Address
6702 NW 72ND AVE MIAMI, FL 33166	6702 NW 72ND AVE MIAMI, FL 33166

DO NOT WRITE IN THIS SPACE

01042006   No Chg-P   CR2E034 (11/05)

4. FEI Number 65-1053563	Applied For Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, ROGELIO
14444 NW 87TH PL.
MIAMI, FL 33018

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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 or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2006 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	RODRIGUEZ, ROGELIO
STREET ADDRESS	14444 NW 87TH PL.
CITY-ST-ZIP	MIAMI LAKES, FL 33018

TITLE	VCFD
NAME	RODRIGUEZ, LAZARO
STREET ADDRESS	17310 N.W. 74 AVE., #102
CITY-ST-ZIP	MIAMI, FL

TITLE	ST
NAME	AMAT, MARTHA
STREET ADDRESS	17310 N.W. 74 AVE., #102
CITY-ST-ZIP	MIAMI, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/01/06-80025-008 150.00

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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 607, 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: *Rogelio Rodriguez*   2/15/06   305-888 6680

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #