2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058371

Entity Name: CABRERA ACCOUNTING SERVICES, INC.

FILED Apr 30, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

10200 W STATE ROAD 84, #229 4611 S. UNIVERSITY DRIVE DAVIE, FL 33324

#243

DAVIE, FL 33328

Current Mailing Address: New Mailing Address:

10200 W STATE ROAD 84, #229 4611 S. UNIVERSITY DRIVE

DAVIE, FL 33324 #243

DAVIE, FL 33328

FEI Number: 65-1114639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CABRERA, ANGELA CABRERA, ANGELA 10200 W STATE ROAD 84, #229 4611 S. UNIVERSITY DRIVE

DAVIE, FL 33324 US #243 DAVIE, FL 33328 US

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.

SIGNATURE: ANGELA CABRERA 04/30/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

CABRERA, ANGELA CABRERA, ANGELA Name: Name: 10200 W STATE ROAD 84, #229 4611 S. UNIVERSITY DRIVE #243 Address: Address:

City-St-Zip: **DAVIE, FL 33324** City-St-Zip: **DAVIE, FL 33328**

() Delete Title: VPD Title: VPD (X) Change () Addition

Name: CABRERA, ARMANDO Name: CABRERA, ARMANDO

10200 W STATE ROAD 84, #229 Address: 4611 S. UNIVERSITY DRIVE #243 Address:

DAVIE, FL 33324 DAVIE, FL 33328 City-St-Zip: City-St-Zip:

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.

SIGNATURE: ANGELA CABRERA PD 04/30/2008