


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90036 027 ***158.75

DOCUMENT # P01000066775 1. Entity Name SERES ONE-STEP SERVICES, INC.					
Principal Place of Business 4601 66TH STREET W. STE. 613 B BRADENTON FL 34210			Mailing Address 4601 66TH STREET W. STE. 613 B BRADENTON FL 34210		
2. Principal Place of Business - No P.O. Box # NEW / SAME AS 3		3. Mailing Address 4550 47TH ST. W.			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. APT # 613			
City & State 		City & State BRADENTON FL.		4. FEI Number 65-1116383	
Zip 		Zip 34210		Country CITY	
6. Name and Address of Current Registered Agent SERES, JOHN 4601 66TH STREET WEST, APT 106 BRADENTON FL 34210				7. Name and Address of New Registered Agent Name NEW / SAME AS 3 Street Address (P.O. Box Number is Not Acceptable) 	
City 				City FL	
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 <u><i>John Seres</i></u> (NOTE: Registered Agent signature required when re-registering) 3/29/07					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	DPT	<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME	SERES, JOHN		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	4601 66TH STREET W. STE. 613B		NAME	SERES, JOHN	
CITY - ST - ZIP	BRADENTON FL 34210		STREET ADDRESS	4550 47TH ST. W. APT #613	
			CITY - ST - ZIP	BRADENTON, FL. 34210	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u><i>John Seres</i></u> 3/29/07 (941) 807-2474					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					