2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000012985

Entity Name: NATIONWIDE SERVICES PROVIDER, INC

FILED Mar 16, 2005 Secretary of State

The state of the s						
Current Pr	of Business:	New Prin	New Principal Place of Business:			
10510 SW 47 AVE. OCALA, FL 34476				6730 SW 129 LP OCALA, FL 34473		
Current Ma	:	New Mail	New Mailing Address:			
10510 SW 47 AVE. OCALA, FL 34476				6730 SW 129 LP OCALA, FL 34473		
FEI Number:	55-0828055	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
RAMOS, YAZMIN 10510 SW 47 AVE OCALA, FL 34476 US			6730 SW	RAMOS, YAZMIN 6730 SW 129 LP OCALA, FL 34473 US		
The above in the State		bmits this statement for the p	urpose of changing	its register	ed office or registered agent, or both,	
SIGNATURE: YAZMIN RAMOS					03/16/2005	
	Electronic	Signature of Registered Age	ent		Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	RAMOS, YAZMIN 10510 SW 47 AV OCALA, FL 3447 T () E GONZALEZ, FRA	E 8 Pelete NCIS	Title: Name: Address: City-St-Zip: Title: Name:	DP RAMOS, Y 6730 SW OCALA, FI	129 LP	
Address: City-St-Zip:	14590 SW 43 CT OCALA, FL 3447		Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	S () E GONZALEZ, NEL 14590 SW 43 CT OCALA, FL 3447	. RD.	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SRV () C SMALLWOOD, B 10727 SW 45 AV OCALA, FL 3447	E.	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: YAZMIN RAMOS PRES 03/16/2005