

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016516

FILED  
May 01, 2005  
Secretary of State

Entity Name: ALLIED SERVICES COMPANY

**Current Principal Place of Business:**

2911 DUSA DRIVE  
SUITES D&E  
MELBOURNE, FL 32934

**New Principal Place of Business:**

4474 KAISER AVE.  
SAINT CLOUD, FL 34772

**Current Mailing Address:**

2911 DUSA DRIVE  
SUITES D&E  
MELBOURNE, FL 32934

**New Mailing Address:**

4474 KAISER AVE.  
SAINT CLOUD, FL 34772

FEI Number: 41-2028877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FINKBEINER, FRANK G  
108 EAST HILLCREST STREET  
ORLANDO, FL 32801 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FINKBEINER, FRANK G  
Address: 108 E. HILLCREST STREET  
City-St-Zip: ORLANDO, FL 32801

Title: P ( ) Delete  
Name: GRAULICH, ARHTUR C  
Address: 4474 KAISER AVE.  
City-St-Zip: ST. CLOUD, FL 34772

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ARTHUR C. GRAULICH

P

05/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date