2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008
Secretary of State

DOCUMENT# P02000027151

Entity Name: A SAYA MULTISERVICES, INC.

Current Principal Place of Business:

4075 SW 54TH CT.
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

4075 SW 54TH CT.
OCALA, FL 34474

New Mailing Address:

PO BOX 770723
OCALA, FL 34477 US

FEI Number: 01-0642947 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, ELENA
4075 SW 54TH CT
OCALA, FL 34474 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SAYA, ARMANDO
Address: 4075 SW 54TH CT
City-St-Zip: OCALA, FL 34474

Title: VD ( ) Delete
Name: GONZALEZ, ELENA
Address: 4075 SW 54TH CT
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete
Name: SAYA, GRACE
Address: 4075 SW 54TH CT
City-St-Zip: OCALA, FL 34474

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SAYA, ARMANDO
Address: PO BOX 770023
City-St-Zip: OCALA, FL 34477 US

Title: S (X) Change ( ) Addition
Name: GONZALEZ, ELENA
Address: PO BOX 770023
City-St-Zip: OCALA, FL 34477 US

Title: D (X) Change ( ) Addition
Name: SAYA, GRACE
Address: PO BOX 770023
City-St-Zip: OCALA, FL 34477 US

Title: V ( ) Change (X) Addition
Name: SAYA, ALEX
Address: PO BOX 770023
City-St-Zip: OCALA, FL 34477 US

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: ELENA GONZALEZ S 02/08/2008

Electronic Signature of Signing Officer or Director — Date