

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000032996

FILED
Oct 16, 2006
Secretary of State

Entity Name: LEGAL DOC. PREPARATION SECRETARIAL SERVICES, INC.

Current Principal Place of Business:

4330 W.BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317

New Principal Place of Business:

Current Mailing Address:

4330 WEST BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317

New Mailing Address:

FEI Number: 75-3036419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, MONICA F
4330 WEST BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317 US

Name and Address of New Registered Agent:

CAMPBELL, MONICA
4330 WEST BROWARD BLVD STE-E
FT LAUDERDALE, FL 33317 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: MONICA CAMPBELL

10/16/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAMPBELL, MONICA F
Address: PO BOX 120458
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DV () Delete
Name: CAMPBELL, LEROY A
Address: PO BOX 120458
City-St-Zip: FT LAUDERDALE, FL 33312

Title: S (X) Delete
Name: SMITH, LINDA A
Address: PO BOX 120458
City-St-Zip: FT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CAMPBELL, MONICA
Address: PO BOX 120458
City-St-Zip: FT LAUDERDALE, FL 33312

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 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: MONICA CAMPBELL

PRES

10/16/2006

Electronic Signature of Signing Officer or Director

Date