

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000042263

FILED
Jul 25, 2006
Secretary of State

Entity Name: IDEAL SERVICES OF TAMPA INC.

Current Principal Place of Business:

PO BOX 1106
SAN ANTONIO, FL 33576

New Principal Place of Business:

Current Mailing Address:

PO BOX 1106
SAN ANTONIO, FL 33576

New Mailing Address:

FEI Number: 04-3672115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, ANDREW
15810 COUNTRYBROOK ST
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

HOFFMAN, ANDREW
31920 PASCO ROAD
SAN ANTONIO, FL 33576 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:

07/25/2006

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: PD () Delete
Name: HOFFMAN, ANDREW
Address: 15810 COUNTRYBROOK ST
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOFFMAN, ANDREW
Address: 31920 PASCO ROAD
City-St-Zip: SAN ANTONIO, FL 33576

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: ANDREW G. HOFFMAN

PD

07/25/2006

Electronic Signature of Signing Officer or Director

Date