2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000053680

Entity Names CARCIA COREEN CERVICE

GARCIA, EDUARDO

4532 SUBURBAN PINES DR

LAKE WORTH, FL 33463

Name:

Address: City-St-Zip: FILED Apr 29, 2008 Secretary of State

Entity Name: GARCIA SCREEN SERVICES INC. **Current Principal Place of Business: New Principal Place of Business:** 615 WHITNEY AVE. #7 4532 SUBURBAN PINES DR LANTANA, FL 33462 LAKE WORTH, FL 33463 **Current Mailing Address: New Mailing Address:** 4532 SUBURBAN PINES DR LAKE WORTH, FL 33463 FEI Number: 03-0443396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARCIA, ANGEL 4532 SÜBURBAN PINES DR LAKE WORTH, FL 33463 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSVD () Delete Title: () Change () Addition Name: GARCIA, ANGEL Name: 4532 SUBURBAN PINES DR Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: Title: () Delete () Change () Addition Name: GARCIA. IVELISSE Name: 4532 SUBURBAN PINES DR Address: Address: LAKE WORTH, FL 33463 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ANGEL GARCIA PSVD 04/29/2008