## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000053680

**Entity Name:** GARCIA SCREEN SERVICES INC.

**FILED** May 08, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4532 SUBURBAN PINES DR 211 SOUTH EAST 10TH AVE LAKE WORTH, FL 33463

BOYNTON BEACH, FL 33435

**Current Mailing Address: New Mailing Address:** 

86 CITRUS PARK LANE 4532 SUBURBAN PINES DR LAKE WORTH, FL 33463 BOYNTON BEACH, FL 33436

FEI Number: 03-0443396 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARCIA, ANGEL GARCIA, ANGEL 86 CITRÚS PARK LANE 4532 SUBURBAN PINES DR

US LAKE WORTH, FL 33463 BOYNTON BEACH, FL 33436

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: 05/08/2009

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PSVD** ( ) Delete Title: **PSVD** (X) Change ( ) Addition

Name: GARCIA, ANGEL Name: GARCIA, ANGEL 4532 SUBURBAN PINES DR 86 CITRUS PARK LANE Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: BOYNTON BEACH, FL 33436

Title: (X) Change ( ) Addition Title: () Delete TD

Name: GARCIA. IVELISSE Name: GARCIA. IVELISSE 4532 SUBURBAN PINES DR 86 CITRUS PARK LANE Address: Address: LAKE WORTH, FL 33463 BOYNTON BEACH, FL 33436 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition () Delete

GARCIA, EDUARDO GARCIA, EDUARDO Name: Name: 4532 SUBURBAN PINES DR 86 CITRUS PARK LANE Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: BOYNTON BEACH, FL 33436

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: ANGEL GARCIA **PSVD** 05/08/2009