

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073479

FILED
May 03, 2005
Secretary of State

Entity Name: INTERNATIONAL MULTI SERVICES, U.S.A. INC.

Current Principal Place of Business:

10661 NORTH KENDALL DRIVE
SUITE 200 ROOM 229
MIAMI, FL 33176

New Principal Place of Business:

166 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

Current Mailing Address:

10661 NORTH KENDALL DRIVE
SUITE 200 ROOM 229
MIAMI, FL 33176

New Mailing Address:

166N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

FEI Number: 02-0621564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ANTONIO
10415 SW 154 COURT
APTO #1
MIAMI, FL 33196 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: GONZALEZ, ANTONIO
Address: 10625 HAMMOCK BLVD., #511
City-St-Zip: MIAMI, FL 33196

Title: VD () Delete
Name: HURTADO, MARIA TERESA
Address: 10625 HAMMOCK BLVD., #511
City-St-Zip: MIAMI, FL 33196

Title: VD () Delete
Name: FRIEDWALD, MARIO
Address: 2051 N.E 209 STREET
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Section 119.07(3)(i), 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: ANTONIO GONZALEZ

PD

05/03/2005

Electronic Signature of Signing Officer or Director

Date