

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080477

FILED
Jan 02, 2007
Secretary of State

Entity Name: MOBILE SERVICES INTERNATIONAL, INC.

Current Principal Place of Business:

10100 W. SAMPLE RD., STE. 308
CORAL SPRINGS, FL 330653926 US

New Principal Place of Business:

Current Mailing Address:

10100 W. SAMPLE RD., STE. 308
CORAL SPRINGS, FL 330653926 US

New Mailing Address:

FEI Number: 16-1617806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VASQUEZ, ELSA N
5887 NW 119TH DR
CORAL SPRINGS, FL 33076 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: MR () Delete
Name: VASQUEZ, NELSON R MR
Address: 12400 SW 81ST AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: MRS () Delete
Name: VASQUEZ, ELSA N MRS
Address: 5887 NW 119TH DR
City-St-Zip: CORAL SPRINGS, FL 330764028 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ELSA N VASQUEZ

MRS

01/02/2007

Electronic Signature of Signing Officer or Director

_____ Date