2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108849

Entity Name: RELIABLE SERVICES OF PALM BEACH, INC.

FILED Mar 01, 2005 Secretary of State

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

210 NW 38TH PLACE 210 NW 38TH PLACE

POMPANO BEACH, FL 33064 DEERFIELD BEACH, FL 33064

Current Mailing Address: New Mailing Address:

210 NW 38TH PLACE 210 NW 38TH PLACE

POMPANO BEACH, FL 33064 DEERFIELD BEACH, FL 33064

FEI Number: 32-0037476 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:

PEREIRA, FABIO D
210 NW 38TH PLACE
PEREIRA, FABIO D
210 NW 38TH PLACE

POMPANO BEACH, FL 33064 US DEERFIELD BEACH, FL 33064 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: FABIO D. PEREIRA 03/01/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PEREIRA, FABIO D

 Name:
 PEREIRA, FABIO D

 Address:
 210 NW 38TH PLACE
 Address:
 210 NW 38TH PLACE

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:
 DEERFIELD BEACH, FL 33064

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

 Name:
 SOUZA, ELIZABETH B
 Name:
 SOUZA, ELIZABETH B

 Address:
 210 NW 38TH PLACE
 Address:
 210 NW 38TH PLACE

City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: DEERFIELD BEACH, FL 33064

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: FABIO D. PEREIRA PTD 03/01/2005