

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000123312

FILED
Apr 29, 2004
Secretary of State

Entity Name: A.M.O. PROFESSIONAL ACCOUNTING SERVICE, INC.

Current Principal Place of Business:

6011 WEST 16TH AVENUE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

6011 WEST 16 AVENUE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 71-0913807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAPATA, MARA
9139 NW 117 STREET
HIALEAH GARDENS, FL 33018 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: P () Delete
Name: ZAPATA, MARA
Address: 1570 W 55 PLACE
City-St-Zip: HIALEAH, FL 33012

Title: TR. () Delete
Name: BORROTO, OSMARA
Address: 220 NW 59 AVE APT0 307A
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TR. (X) Change () Addition
Name: BORROTO, OSMARA
Address: 5220 NW 7TH STREET APT. 307-A
City-St-Zip: MIAMI, FL 33126

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: OSMARA BORROTO

TR

04/29/2004

Electronic Signature of Signing Officer or Director

Date