

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000126715

FILED
Dec 13, 2007
Secretary of State**Entity Name:** PRISTINE SERVICES OF SOUTH FLORIDA INC.**Current Principal Place of Business:**6365 TAFT STREET
1008
HOLLYWOOD, FL 33024**New Principal Place of Business:**10687 NW 122 STREET
MEDLEY, FL 33178**Current Mailing Address:**6365 TAFT STREET
1008
HOLLYWOOD, FL 33024**New Mailing Address:**10687 NW 122 STREET
MEDLEY, FL 33178**FEI Number:** 33-1032328**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEVY, PAUL A MR.
751 NW 207 TERRACE
PEMBROKE PINES, FL 33029 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**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: LEVY, PAUL A MR
Address: 751 NW 207 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029**Title:** V () Delete
Name: LEVY, DIANE E MRS
Address: 751 NW 207 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** V (X) Change () Addition
Name: LEVY, KAYANDRA M MISS
Address: 751 NW 207 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029**Title:** V () Change (X) Addition
Name: LEVY, ALYANA J MISS
Address: 751 NW 207 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

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: PAUL LEVY

P

12/13/2007

Electronic Signature of Signing Officer or Director_____
Date