

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000018106

Entity Name: EL COQUI SERVICES, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

15425 CEDARWOOD LANE  
SUITE 205  
NAPLES, FL 34110

## **New Principal Place of Business:**

8841 WEST TERRY STREET  
SUITE 6  
BONITA SPRINGS, FL 34135

## **Current Mailing Address:**

PO BOX 368234  
BONITA SPRINGS, FL 34136

## **New Mailing Address:**

FEI Number: 14-1871965

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ALICEA, JACQUELINE  
15425 CEDARWOOD LN  
S-205  
NAPLES, FL 34110 US

## **Name and Address of New Registered Agent:**

ALICEA, JACQUELINE  
8841 WEST TERRY STREET  
SUITE 6  
BONITA SPRINGS, FL 34135 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: JACQUELINE ALICEA

04/29/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: ALICEA, JACQUELINE  
Address: 15425 CEDARWOOD LANE #205  
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: JACQUELINE ALICEA

P

04/29/2011

Electronic Signature of Signing Officer or Director

Date