

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

APPROVED
AND
FILED

05 MAY 13 PM 6:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000027502

1. Entity Name
AT YOUR SERVICE BY JOSEF, INC.



Principal Place of Business
4151 NE 15 TERRACE
POMPANO BEACH, FL 33064

Mailing Address
4151 NE 15 TERRACE
POMPANO BEACH, FL 33064

DO NOT WRITE IN THIS SPACE



5022005 No Chg-P CR2E034 (10/03)

4. FEI Number
57-1154580

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

NETO, JOSE A
4151 NE 15 TERRACE
POMPANO BEACH, FL 33064

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME NETO, JOSE A
STREET ADDRESS 4151 NE 15 TERRACE
CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE
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STREET ADDRESS
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000055584320
06/01/05--01061--005 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(JOSE A. NETO)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/04/2005

Date

(954)709-6569

Daytime Phone #