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DOCUMENT # P03000041069  1. Entity Name  ANGELSITE PROCESSING SERVICES INC.				SECR DIVISION	FILLED ETARY OF STA OF CORPORA OF CORPORA	L'ED RY OF STATE CORPORATIONS	
Principal Place	e of Business	Mailing Address	<u> </u>		U4 III	<b>)</b>	.'
2930 OKEEC WEST PALM	CHOBÉE BLVD #207 BÉACH FL 33409	2930 OKEECHOBEE BI WEST PALM BEACH FI		REA	STATEM	ENT (	у.
Suite, Apt.	LOGUII CT.	3 Mailing Address Suite, Apt. #, etc.	nneipa	0			
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33411	PATM BCh	Zip	Country	5. Certifica	ate of Status Desired	S8.75 Add Fee Require	
	6. Name and Address of Current I	Registered Agent	Name	7. Name a	nd Address of New Reg	istered Agent	
-OTE	RO, DEBBIE		Name	<del>USINU</del>	UTERO	<u></u>	
2930 OKEECHOBEE BLVD #207			Street 3 do	Second Second	riper is Mod Acceptable	•	
WES	ST PALM BEACH FL 33409				,		
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8. The above		r the purpose of changing its	registered office or re	egistered agent, or	both, in the State of Florid		and accept
the obligat	registered agent.	•					
SIGNATURE -	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered Agent signature	required when reinstating		DATE	<del></del>
e Same de seus E	ILE NOW!!! FEE IS \$550.00	49 772.479	F.S., allows for the w		-		
	DUE BY September 8, 2004 Payable to Florida Department of	late fee. By chec	king this box, the colorior notice. Fee to fil	rporation certifies it	9. Election Campaig Trust Fund Contri		00 May Be d to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITION	S/CHANGES TO OFFIC	ERS AND DIRECTORS	3 IN 11
TITLE NAME	P : OTERO, DEBBIE	☐ Delete	TITLE NAME			☐ Change	☐ Addition
STREET ADDRESS	123 SEAGULL COURT		STREET ADDRESS		<b>0004236</b>	2059	
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411		CITY-ST-ZIP	11/0	1/04010670	019 **150.00	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the 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 off the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block, changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

**SIGNATURE:** 

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

## ANGELSITE PROCESSING SERVICE 123 SEAGULL COURT WEST PALM BEACH, FL 33411

TEL: (561)640-5950 FAX: (561)640-5952 CELL: (561)767-6577

October 27, 2004

To Whom It May Concern:

Enclosed please find check # 1109 in the amount of \$150.00 for the annual report fee.

On October 5<sup>th</sup>, I called your office and spoke to someone, whose name I did not obtain, and informed him that I could not pay the fee at that time as my company was badly hit by the hurricane and I was not able to work. He advised me to send the fee as soon as I was able, accompanied by a letter stating the same to reactivated my corporation.

Please note that my address has changed. My new address is:

123 Seagull Court Royal Palm Beach, FL33411

Please make the proper changes to your records.

Thank you for your prompt attention to this matter.

Sincerely:

Debbie Otero

Owner