

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000061980

Entity Name: SERVICARGA OF AMERICA, INC.

**FILED**  
**Aug 07, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

4759 NW 72 AVENUE  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

4759 NW 72 AVENUE  
MIAMI, FL 33166

**New Mailing Address:**

FEI Number: 80-0067776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLEITES, MARIA ELENA  
4759 NW 72 AVENUE  
MIAMI, FL 33166 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: PD ( ) Delete  
Name: FLEITES, MARIA ELENA  
Address: 4759 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: V-P ( ) Delete  
Name: RIPEPI, ARMANDO  
Address: 4759 N.W. 72 AVE  
City-St-Zip: MIAMI, FL 33166

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TRES (X) Change ( ) Addition  
Name: FLEITES, MARIA ELENA  
Address: 4759 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33166

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

Title: PR ( ) Change (X) Addition  
Name: FEO LA CRUZ, SALVADOR  
Address: 4128 FOREST DRIVE  
City-St-Zip: WESTON, FL 33332

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIA ELENA FLEITES

TRES

08/07/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date