

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076053

**FILED**  
**Apr 10, 2011**  
**Secretary of State**

**Entity Name:** SERVICE 4 YOU,INC.

**Current Principal Place of Business:**

450 LAKE BRIDGE LANE  
SUITE 1822  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

450 LAKE BRIDGE LANE  
SUITE 1822  
APOPKA, FL 32703 US

**New Mailing Address:**

**FEI Number:** 20-0085171      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PROFESSIONAL ACCOUNTANTS & CONSULTANTS,INC  
417 CENTER POINT CIRCLE SUITE  
ALTAMONTE SPRINGS, FL 32701 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: PTS  
Name: GARCIA, LAURA R  
Address: 450 LAKE BRIDGE LANE SUITE, 1822  
City-St-Zip: APOPKA, FL 32703 US

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: LAURA GARCIA

PTS

04/10/2011

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

\_\_\_\_\_ Date