

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102742

FILED  
May 21, 2008  
Secretary of State

Entity Name: CS STUDIOS AND SERVICES, CORP.

## Current Principal Place of Business:

2353 SADMET LN  
NORTH PORT, FL 34286

## New Principal Place of Business:

6176 NICOLE CT  
SARASOTA, FL 34243

## Current Mailing Address:

2353 SADMET LN  
NORTH PORT, FL 34286

## New Mailing Address:

6176 NICOLE CT  
SARASOTA, FL 34243

FEI Number: 20-0239005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTOS, CATIA  
2353 SADMET LN  
NORTH PORT, FL 34286 US

## Name and Address of New Registered Agent:

SANTOS, CATIA  
6176 NICOLE CT  
SARASOTA, FL 34243 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: CATIA SANTOS

05/21/2008

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SANTOS, CATIA  
Address: 2353 SADMET LN  
City-St-Zip: NORTH PORT, FL 34286

Title: VD ( ) Delete  
Name: SANTOS, FERNANDO  
Address: 2353 SADMET LN  
City-St-Zip: NORTH PORT, FL 34286

Title: STD ( ) Delete  
Name: COSTA, CASSIANA  
Address: 3370 BEAU RIVAGE DR B-2  
City-St-Zip: POMPANO BEACH, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SANTOS, CATIA  
Address: 6176 NICOLE CT  
City-St-Zip: SARASOTA, FL 34243

Title: VD (X) Change ( ) Addition  
Name: SANTOS, FERNANDO  
Address: 6176 NICOLE CT  
City-St-Zip: SARASOTA, FL 34243

Title: STD (X) Change ( ) Addition  
Name: COSTA, CASSIANA  
Address: 6176 NICOLE CT  
City-St-Zip: SARASOTA, FL 34243

I hereby certify that the information supplied with this filing does not qualify 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: CATIA SANTOS

PD

05/21/2008

Electronic Signature of Signing Officer or Director

Date