

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 8:00 am
Secretary of State

03-05-2004 90010 033 ***150.00

DOCUMENT # P03000127440					
1. Entity Name MSL SERVICES, CORP.					
Principal Place of Business 2833 W. 71ST ST. HIALEAH, FL 33018			Maining Address 2833 W. 71ST ST. HIALEAH, FL 33018		
2. Principal Place of Business			3. Maining Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FCI Number 20-0393028	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANTANA, LUIS 2833 W. 71ST ST. HIALEAH, FL 33018				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number's Not Acceptable) _____ City _____ FL Zip Code _____	
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: <i>Luis Santana</i> 3-1-04					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY ST ZIP	PD SANTANA, LUIS 2833 W. 71ST ST. HIALEAH, FL 33018	☒ Delete			
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY ST ZIP	PD MARITZA SANTANA 2833 W. 71ST ST. HIALEAH, FL 33018	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 a power of attorney. SIGNATURE: <i>M. Santana</i>					