

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128161

Entity Name: MANUEL SERVICE, INC.

FILED
Jul 13, 2005
Secretary of State

Current Principal Place of Business:

1809 MAHOGANY DR
ORLANDO, FL 32825

New Principal Place of Business:

3462 BENSON PARK BLVD
ORLANDO, FL 32829

Current Mailing Address:

1809 MAHOGANY DR
ORLANDO, FL 32825

New Mailing Address:

3462 BENSON PARK BLVD
ORLANDO, FL 32829

FEI Number: 20-0373417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANUEL, RAMIREZ
1809 MAHOGANY DR
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

MANUEL, RAMIREZ
3462 BENSON PARK BLVD
ORLANDO, FL 32829 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: MANUEL RAMIREZ

07/13/2005

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: P () Delete
Name: RAMIREZ, MANUEL R
Address: 1809 MAHOGANY DR
City-St-Zip: ORLANDO, FL 32825

Title: VP () Delete
Name: CYNTHIA, RAMIREZ A
Address: 1809 MAHOGANY DR
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAMIREZ, MANUEL R
Address: 3462 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829

Title: VP (X) Change () Addition
Name: CYNTHIA, RAMIREZ A
Address: 3462 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANUEL RAMIREZ

P

07/13/2005

Electronic Signature of Signing Officer or Director

Date