

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141875

FILED
Mar 04, 2006
Secretary of State

Entity Name: A & M MULTISERVICES CORPORATION

Current Principal Place of Business:

2164 FOUNDER ROAD
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

2164 FOUNDER ROAD
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 20-0407317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERRA, MARK C
600 BYPASS DRIVE
SUITE #109
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

ISVANCA, ANTON C
2164 FOUNDER RD
SPRING HILL, FL 34606 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: ANTON ISVANCA

03/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ISVANCA, ANTON
Address: 2164 FOUNDER ROAD
City-St-Zip: SPRING HILL, FL 34606

Title: ST () Delete
Name: ISVANCA, MARIA
Address: 2164 FOUNDER ROAD
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANTON ISVANCA

P

03/04/2006

Electronic Signature of Signing Officer or Director

Date