

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152345

Entity Name: SCHULDES SERVICES INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

% DEREK M. SCHULDES
365 NE FLORESTA DR
PORT ST LUCIE, FL 34983

New Principal Place of Business:

% DEREK M. SCHULDES
P.O. BOX 880517
PORT ST LUCIE, FL 34988

Current Mailing Address:

New Mailing Address:

% DEREK M. SCHULDES
P.O. BOX 881483
PORT ST LUCIE, FL 34988

FEI Number: 20-0611152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHULDES, DEREK M
365 NE FLORESTA DR
PORT ST LUCIE, FL 34983 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHULDES, DEREK M
Address: 365 NE FLORESTA DR
City-St-Zip: PORT ST LUCIE, FL 34983

Title: VST () Delete
Name: SCHULDES, KIMBERLY A
Address: 365 NE FLORESTA DR
City-St-Zip: PORT ST LUCIE, FL 34983

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 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: KIMBERLY A SCHULDES

VST

04/24/2006

Electronic Signature of Signing Officer or Director

Date