

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000006360

Entity Name: RELIASERVE, INC.

FILED
Mar 09, 2005
Secretary of State

Current Principal Place of Business:

17300 SW 7TH STREET
PEMBROKE PINES, FL 33029

Current Mailing Address:

17300 SW 7TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
SUITE 410
SUNRISE, FL 33323

New Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY
SUITE 410
SUNRISE, FL 33323

FEI Number: 20-0771976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCH, MICHAEL P
17300 SW 7TH STREET
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

LYNCH, MICHAEL P
3023 SW 141 TERRACE
DAVIE, FL 33330 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: MICHAEL LYNCH

03/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LYNCH, MICHAEL P
Address: 17300 SW 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LYNCH, MICHAEL P
Address: 3023 SW 141 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33330

Title: D () Change (X) Addition
Name: OROZCO, TOMAS I
Address: 1398 NW 192 LANE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Change (X) Addition
Name: BARALT, JOAQUIN
Address: 13505 SW 104 TERRACE
City-St-Zip: MIAMI, FL 33186

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: MICHAEL P. LYNCH

P

03/09/2005

Electronic Signature of Signing Officer or Director

Date