

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037418

Entity Name: SERVIDISTAR INC.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

4675 WEST 18TH COURT  
804  
HIALEAH, FL 33012

## Current Mailing Address:

4675 WEST 18TH COURT  
804  
HIALEAH, FL 33012

## New Principal Place of Business:

3660 NE 166 STREET  
703  
NORTH MIAMI BEACH, FL 33160

## New Mailing Address:

3660 NE 166 STREET  
703  
NORTH MIAMI BEACH, FL 33160

FEI Number: 34-1983431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAGES, FEDERICO  
4675 WEST 18TH COURT  
804  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

OCAMPO, HERMELINDA I  
3660 NE 166 STREET  
703  
NORTH MIAMI BEACH, FL 33160 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: HERMELINDA I. OCAMPO

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ROJAS, FANNI  
Address: 4675 WEST 18TH COURT # 804  
City-St-Zip: HIALEAH, FL 33012

Title: VD ( ) Delete  
Name: OCAMPO, IRENE  
Address: 4675 WEST 18TH COURT # 804  
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Delete  
Name: FAGES, FEDERICO  
Address: 4675 WEST 18TH COURT # 804  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ROJAS, FANNI  
Address: 3660 NE 166 STREET # 703  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VD (X) Change ( ) Addition  
Name: OCAMPO, HERMELINDA I  
Address: 3660 NE 166 STREET #703  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: FANNI ROJAS

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date