

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046822

FILED
Apr 30, 2008
Secretary of State

Entity Name: HORIZON FINANCIAL SERVICES, INC.

Current Principal Place of Business:

5700 LAKE WORTH RD.
SUITE 304
GREENACRES, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

5700 LAKE WORTH RD.
SUITE 304
GREENACRES, FL 33463 US

New Mailing Address:

FEI Number: 20-0865884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAISIMOND, BIGLAUWICK
5020 POLARIS COVE
GREENACRES, FL 33463 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: LOUIMA, ABNER
Address: 16720 NW 80TH CT
City-St-Zip: MIAMI, FL 33018 US

Title: V (X) Delete
Name: PLAISIMOND, BIGLAUWICK
Address: 5020 POLARIS COVE
City-St-Zip: GREENACRES, FL 33463 US

Title: S (X) Delete
Name: DUBOIS, MYRTHA
Address: 5700 LAKE WORTH ROAD, STE 304
City-St-Zip: GREENACRES, FL 33463 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: PLAISIMOND, BIGLAUWICK
Address: 5020 POLARIS COVE
City-St-Zip: GREENACRES, FL 33463 US

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: BIGLAUWICK PLAISIMOND

PVST

04/30/2008

Electronic Signature of Signing Officer or Director

Date