


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2006 08:00 AM
Secretary of State

| | | | |
|--|--|--|-------------------------------|
| DOCUMENT # P04000059966 1. Entity Name 88 SERVICES, CORP. | |  | |
| Principal Place of Business 3065 SW 137 AVE MIRAMAR, FL 33027 | | Mailing Address 3065 SW 137 AVE MIRAMAR, FL 33027 | |
| DO NOT WRITE IN THIS SPACE | |  | |
| | | 01142006 No Chg-P CR2E034 (11/05) | |
| | | 4. FEI Number 20-0990292 | Applied For Not Applicable |
| | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent LOPEZ, YSABEL M 3065 SW 137 AVE MIRAMAR, FL 33027 | | DO NOT WRITE IN THIS SPACE | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | |
| SIGNATURE  | | 01/31/06. DATE | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | DO NOT WRITE IN THIS SPACE U000000562562 05/19/06-80057-018 150.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PT LOPEZ, LUCIO A 3065 SW 137 AVE MIRAMAR, FL 33027 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPS LOPEZ, YSABEL M 3065 SW 137 AVE MIRAMAR, FL 33027 | | |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE:  | | 01/31/06. 954 421 4305 Daytime Phone # | |