

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065935

Entity Name: AP CONSULTANCY SERVICES, INC.

FILED  
Apr 23, 2007  
Secretary of State

## Current Principal Place of Business:

730 NE 42ND ST  
POMPAN0 BEACH, FL 33064

## New Principal Place of Business:

## Current Mailing Address:

730 NE 42ND ST  
POMPAN0 BEACH, FL 33064

## New Mailing Address:

FEI Number: 20-1038527

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPAN0 BEACH, FL 33064 US

## Name and Address of New Registered Agent:

BUSINESS CHOICE ACCOUNTING  
4701 N. FEDERAL HIGHWAY  
445-C9  
LIGHTHOUSE POINT, FL 33064 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: JOSE EDUARDO JACCOUD

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PONTES, PAULO  
Address: 2700 NW 44TH ST, # 615  
City-St-Zip: OAKLAND PARK, FL 33309

Title: VPD ( ) Delete  
Name: FARIA, ADRIANA  
Address: 2700 NW 44TH ST, # 615  
City-St-Zip: OAKLAND PARK, FL 33309

## 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: PAULO PONTES

PD

04/23/2007

Electronic Signature of Signing Officer or Director

Date