

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 02, 2005 8:00 am
Secretary of State

05-17-2005 90016 030 ***150.00

DOCUMENT # P04000067069 1. Entity Name LATIN AMERICA SERVICES INC,																													
Principal Place of Business 6015 S. DIXIE HWY WEST PALM BEACH, FL 33405			Mailing Address 6015 S. DIXIE HWY WEST PALM BEACH, FL 33405																										
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country																										
4. FEI Number 75-8153040				Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent EVANS, PATTY MS. 1286 THE POINTE DR. WEST PALM BEACH, FL 33409			7. Name and Address of New Registered Agent Name EVANS, PATTY MS. Street Address (P.O. Box Number is Not Acceptable) 2257 CHICKCHARNIES (ANDROS ISLES) City West Palm Beach FL Zip Code 33411																										
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 <i>Patty Evans</i> DATE 05-12-2005 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing.)																													
FILE NOW!!! FEE IS \$855.00 150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																											
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Patty Evans</i> DATE 05-12-2005 (561) 547 0530 SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													

66020829



05102005 Chg-P CR2E034 (10/03)