

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000078982

Entity Name: AFS PROPERTIES, INC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

3105 WEST WATERS AVENUE
SUITE 305-306
TAMPA, FL 33614

New Principal Place of Business:

19046 BRUCE B DOWNS BLVD
SUITE 223
TAMPA, FL 33647 US

Current Mailing Address:

3105 W. WATERS AVENUE
SUITE 305-306
TAMPA, FL 33614

New Mailing Address:

19046 BRUCE B DOWNS BLVD
SUITE 223
TAMPA, FL 33647 US

FEI Number: 20-1237944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMANDO, ACOSTA
3105 W. WATERS AVENUE
SUITE 305-306
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

ARMANDO, ACOSTA
20118 NOB OAK AVENUE
TAMPA, FL 33647 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: ARMANDO ACOSTA

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVPS () Delete
Name: ACOSTA, ARMANDO
Address: 3105 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33614

Title: TD () Delete
Name: ACOSTA, ARMANDO
Address: 3105 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPS (X) Change () Addition
Name: ACOSTA, ARMANDO
Address: 20118 NOB OAK AVENUE
City-St-Zip: TAMPA, FL 33647 US

Title: TD (X) Change () Addition
Name: ACOSTA, ARMANDO
Address: 20118 NOB OAK AVENUE
City-St-Zip: TAMPA, FL 33647 US

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: ARMANDO ACOSTA

PVPS

04/30/2008

Electronic Signature of Signing Officer or Director

Date