2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132907

Entity Name: STRIKING SERVICE, INC.

FILED Apr 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5045 MICHIGAN AVE 15 B 3474 RUDOLPH RD #5 WEST PALM BEACH, FL 33415 LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

5045 MICHIGAN AVE 15 B 3474 RUDOLPH RD #5 WEST PALM BEACH, FL 33415 LAKE WORTH, FL 33461

FEI Number: 20-1653852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CABRERA, CARLOS A
5045 MICHIGAN AVE 15B
WEST PALM BEACH, FL 33415 US
CABRERA, CARLOS A
3474 RUDOLPH RD #5
LAKE WORTH, FL 33461 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: 04/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 CABRERA, CARLOS A
 Name:
 CABRERA, CARLOS A

 Address:
 5045 MICHIGAN AVE 15B
 Address:
 3474 RUDOLPH RD #5

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 LAKE WORTH, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CARLOS A CABRERA P 04/05/2005