

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148686

FILED
Mar 18, 2007
Secretary of State

Entity Name: FLORIDA CERTIFIED SERVICES CORP.

Current Principal Place of Business:

16218 SW 48 TER
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

16218 SW 48 TER
MIAMI, FL 33185

New Mailing Address:

FEI Number: 20-1824166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIK GROUP CORP
1711 SW 154TH PATH
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SARIO, ANA A
Address: 16218 SW 45TH TERR
City-St-Zip: MIAMI, FL 33185

Title: P () Delete
Name: SARIO, JORGE L JR
Address: 16218 SW 48TH TERR
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SARIO, ANA A
Address: 16218 SW 45TH TERR
City-St-Zip: MIAMI, FL 33185

Title: P (X) Change () Addition
Name: SARIO, JORGE L JR
Address: 16218 SW 48TH TERR
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the 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: JORGE L. SARIO, JR.

P

03/18/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date