## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000155880

Entity Name: FATHER & SON'S REPAIR & MAINTENANCE, INC

FILED Jan 18, 2006 Secretary of State

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

917 N. PALMWAY STREET 1706 CONNECTICUT AVE. KISSIMMEE, FL 34744 ST CLOUD, FL 34769

Current Mailing Address: New Mailing Address:

917 N. PALMWAY STREET P. O. BOX 701871 KISSIMMEE, FL 34744 P. O. BOX 701871 ST CLOUD, FL 34770

FEI Number: 20-1881519 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:

PATTISON, GRACE
917 N PALMWAY STREET
KISSIMMEE, FL 34744 US
YOUNASSOGHLOU, MOSES J
1706 CONNECTICUT AVE
ST CLOUD, FL 34769 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: MOSES J YOUNASSOGHLOU 01/18/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 P
 ( ) Delete

 Name:
 YOUNASSOGHLOU, MOSES J

 Address:
 917 N PALMWAY STREET

 City-St-Zip:
 KISSIMMEE, FL 34744

 Title:
 VP
 ( ) Delete

 Name:
 YOUNASSOGHLOU, ADAM

 Address:
 917 N PALMWAY STREET

 City-St-Zip:
 KISSIMMEE, FL 34744

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: YOUNASSOGHLOU, MOSES J
Address: 1706 CONNECTICUT AVE
City-St-Zip: ST CLOUD, FL 34769

Title: VP (X) Change () Addition

Name: YOUNASSOGHLOU, ADAM Address: 1706 CONNECTICUT AVE City-St-Zip: ST CLOUD, FL 34769

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: MOSES J YOUNASSOGHLOU P 01/18/2006