## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000008528

JOSE ROBERTO PACHECO,

206 MULCH ST

FT PIERCE, FL 34947

Name:

Address:

City-St-Zip:

FILED Apr 28, 2006 Secretary of State

Entity Nan	ne: AGUIAR S	SERVICES CORP			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
206 MULCI FORT PIEF	H ST RCE, FL 3494 <sup>-</sup>	7 US			
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
P.O. BOX 7 FORT PIEF	159 RCE, FL 34982	2 US			
FEI Number:	83-0416573	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
TAXPLACE CORP 2721 S. FEDERAL HWY SUITE 9 FORT PIERCE, FL 34982 US			AGUIAR, JOSUE G 206 MULCH ST FORT PIERCE, FL 34		
The above in the State		submits this statement for the po	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JOSUE G AGUIAR				04/28/2006	
	Electron	ic Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () AGUIAR, JOSUE 206 MULCH ST FORT PIERCE,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () ANTONIO CAMI 206 MULCH ST FT PIERCE, FL	,	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title <sup>.</sup>	D ()	Delete	Title <sup>.</sup>	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOSUE G AGUIAR Ρ 04/28/2006