## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000013786

Entity Name: COMPLETE BOOKKEEPING SERVICES, INC.

FILED Apr 30, 2006 Secretary of State

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

6001 SHAKERWOOD CIRCLE 6001 SHAKERWOOD CIRCLE TAMARAC, FL 33319

206

TAMARAC, FL 33319

**Current Mailing Address:** New Mailing Address:

PO BOX 935023 6001 SHAKERWOOD CIRCLE

TAMARAC, FL 33319 MARGATE, FL 33093 US

FEI Number: 20-2230586 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ERNEST, RICARDO ERNEST, RICARDO 6001 SHÁKERWOOD CIRCLE 6001 SHÅKERWOOD CIRCLE TAMARAC, FL 33319

TAMARAC, FL 33319 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: 04/30/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

ERNEST, RICARDO ERNEST, RICARDO Name: Name: PO BOX 935023 6001 SHAKERWOOD CIRCLE Address: Address: City-St-Zip: MARGATE, FL 33093 US City-St-Zip: TAMARAC, FL 33319 US

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

Name: ERNEST, RICARDO Name: ERNEST, RICARDO PO BOX 935023 6001 SHAKERWOOD CIRCLE Address: Address:

MARGATE, FL 33093 US TAMARAC, FL 33319 US City-St-Zip: City-St-Zip:

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

ERNEST, RICARDO ERNEST, RICARDO Name: Name: PO BOX 935023 6001 SHAKERWOOD CIRCLE Address: Address: City-St-Zip: MARGATE, FL 33093 US City-St-Zip: TAMARAC, FL 33319 US

Title: ( ) Delete Title: (X) Change ( ) Addition ERNEST, RICARDO ERNEST, RICARDO Name: Name:

Address: PO BOX 935023 Address: 6001 SHAKERWOOD CIRCLE City-St-Zip: MARGATE, FL 33093 US City-St-Zip: TAMARAC, FL 33319 US

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.

Ρ SIGNATURE: RICARDO ERNEST 04/30/2006