


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 24, 2006 8:00 am
Secretary of State

04-19-2006 90108 050 ***150.00

DOCUMENT # P05000074584 1. Entity Name A LA VISTA SERVICES, INC.	
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Principal Place of Business 128 LONDON FOG WAY SANFORD, FL 32771-7769	Mailing Address 128 LONDON FOG WAY SANFORD, FL 32771-7769
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66017198



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04012006 Chg-P CR2E034 (11/05)

4. FEI Number 20-3036658	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent COLOMBEY, SARITA M 128 LONDON FOG WAY SANFORD, FL 32771-7769	
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7. Name and Address of New Registered Agent	
Name Sarita M. Colomby	
Street Address (P.O. Box Number is Not Acceptable) 30555 PGA Dr.	
City Sorrento	FL Zip Code 32776

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD COLOMBEY, SARITA M 128 LONDON FOG WAY SANFORD, FL 327717769 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered.

SIGNATURE: Sarita M. Colomby Date: 4/9/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT



66017198

M. Stewart and Company
Accountants & Consultants

May 19, 2006

Florida Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: A LA VISTA SERVICES, INC.
P05000074584

We are the accounting firm for A La Vista Services, Inc. Enclosed is the completed 2006 For Profit Corporation Annual Report. We have completed Block 4. The FEI number 20-3036658.

Thank you for your help in correcting the document. Should you have any further questions, please feel free to contact me.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'Marta Stewart'.

Marta C. Stewart EA
M. STEWART AND COMPANY

enclosure