

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093345

FILED  
Feb 08, 2006  
Secretary of State

Entity Name: GRACE BUSINESS SERVICES INC.

## Current Principal Place of Business:

3564 ANDALUSIA BLVD  
CAPE CORAL, FL 33909

## New Principal Place of Business:

## Current Mailing Address:

3564 ANDALUSIA BLVD  
CAPE CORAL, FL 33909

## New Mailing Address:

FEI Number: 04-3819860

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

INFANTADO, DIVINA G  
3564 ANDALUSIA BLVD  
CAPE CORAL, FL 33909 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: DIVINA G INFANTADO

02/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: INFANTADO, TEODORO L  
Address: 3564 ANDALUSIA BLVD  
City-St-Zip: CAPE CORAL, FL 33909

Title: VD ( ) Delete  
Name: INFANTADO, DIVINA G  
Address: 3564 ANDALUSIA BLVD  
City-St-Zip: CAPE CORAL, FL 33909

Title: S ( ) Delete  
Name: INFANTADO, ALVIN L  
Address: 3564 ANDALUSIA BLVD  
City-St-Zip: CAPE CORAL, FL 33909

Title: T ( ) Delete  
Name: INFANTADO, JEROME  
Address: 3564 ANDALUSIA BLVD  
City-St-Zip: CAPE CORAL, FL 33909

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DIVINA G INFANTADO

VD

02/08/2006

Electronic Signature of Signing Officer or Director

Date