

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000095058

Entity Name: A & L ARCILA SERVICES INC

FILED
Mar 13, 2006
Secretary of State

Current Principal Place of Business:

4799 VIA PALM LAKE
1614
WEST PALM BEACH, FL 33417

New Principal Place of Business:

4043 LAKE TAHOE CIR
WEST PALM BEACH, FL 33409

Current Mailing Address:

4799 VIA PALM LAKE
1614
WEST PALM BEACH, FL 33417

New Mailing Address:

4043 LAKE TAHOE CIR
WEST PALM BEACH, FL 33409

FEI Number: 20-3115444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCILA, LUIS E
4799 VIA PALM LAKE
1614
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

ARCILA, LUIS E
4043 LAKE TAHOE CIR
WEST PALM BEACH, FL 33409 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: LUIS E ARCILA

03/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: ARCILA, ANALISA
Address: 4799 VIA PALM LAKE STE 1614
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V,D () Delete
Name: ARCILA, LUIS E
Address: 4799 VIA PALM LAKE STE 1614
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: ARCILA, ANALISA
Address: 4043 LAKE TAHOE CIR
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V,D (X) Change () Addition
Name: ARCILA, LUIS E
Address: 4043 LAKE TAHOE CIR
City-St-Zip: WEST PALM BEACH, FL 33409

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: LUIS E ARCILA

V,D

03/13/2006

Electronic Signature of Signing Officer or Director

Date