## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000110801

**Entity Name: DOT SERVICES CORP** 

FILED Feb 06, 2007 Secretary of State

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

10302 NW SOUTH RIVER DRIVE 10302 NW SOUTH RIVER DRIVE

SUITE B1 SUITE B-3

MEDLEY, FL 33178 MEDLEY, FL 33178

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

10302 NW SOUTH RIVER DRIVE 10302 NW SOUTH RIVER DRIVE

SUITE B1 SUITE B-3

MEDLEY, FL 33178 US MEDLEY, FL 33178 US

FEI Number: 42-1677331 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HUERTA, CELIA 10302 NW SOUTH RIVER DRIVE

10302 NW SOUTH RIVER DRIVE SUITE B1 SUITE B-3

MEDLEY, FL 33178 US MEDLEY, FL 33178 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.

KANONITZ, JAKE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

SIGNATURE: JAKE KANONITZ 02/06/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete Title:

HUERTA, CELIA KANONITZ, JAKE Name: Name: 10302 NW SOUTH RIVER DR B-1 Address: 10302 NW SOUTH RIVER DR B-3 Address:

City-St-Zip: MEDLEY, FL 33178 City-St-Zip: MEDLEY, FL 33178

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

Name: Name: HUERTA, CELIA

Address: Address: 10302 NW SOUTH RIVER DRIVE B-3

MEDLEY, FL 33178 City-St-Zip: 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: JAKE KANONITZ PRE 02/06/2007