

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113115

FILED  
Apr 18, 2008  
Secretary of State

Entity Name: C E GENERAL SERVICES, CORP.

## Current Principal Place of Business:

36 NE 19TH AVE.  
POMPANO BEACH, FL 33060

## New Principal Place of Business:

36 NE 19TH AVE.  
POMPANO BEACH, FL 33060 US

## Current Mailing Address:

36 NE 19TH AVE.  
POMPANO BEACH, FL 33060

## New Mailing Address:

36 NE 19TH AVE.  
POMPANO BEACH, FL 33060 US

FEI Number: 20-3308892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

USA TAX CORPORATION  
1321 S DIXIE HWY  
SUITE 11AE  
POMPANO BEACH, FL 33060 US

## Name and Address of New Registered Agent:

DOS SANTOS, ANTONIO FLAVIO  
36 NE 19TH AVE.  
POMPANO BEACH, FL 33060 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: ANTONIO FLAVIO DOS SANTOS

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: DOS SANTOS, ANTONIO FLAVIO  
Address: 36 NE 19TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete  
Name: DOS SANTOS FILHO, ANTONIO FLAVIO  
Address: 36 NE 19TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: DOS SANTOS, ANTONIO FLAVIO  
Address: 36 NE 19TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: D (X) Change ( ) Addition  
Name: DOS SANTOS FILHO, ANTONIO FLAVIO  
Address: 36 NE 19TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: D ( ) Change (X) Addition  
Name: SANTOS, PEDRO H  
Address: 36 NE 19TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33060 US

I hereby certify that the information supplied with this filing does not qualify 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: ANTONIO FLAVIO DOS SANTOS

PRES

04/18/2008

Electronic Signature of Signing Officer or Director

Date