


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 08, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05000125217**

1. Entity Name  
 MICHAELIS'S SERVICES INC.



Principal Place of Business  
 5838 GILLIAM RD.  
 ORLANDO, FL 32818

Mailing Address  
 5838 GILLIAM RD.  
 ORLANDO, FL 32818



01052007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 11-3759900	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

5. Name and Address of Current Registered Agent

MICHAELIS, GEORGE  
 5838 GILLIAM RD.  
 ORLANDO, FL 32818

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="radio"/> MICHAELIS, GEORGE 5838 GILLIAM RD. ORLANDO, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="radio"/> MICHAELIS, LINDA 5838 GILLIAM RD. ORLANDO, FL 32818
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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000000628315  
 02/16/07-80009-026 158.75

**DO NOT WRITE IN THIS SPACE**

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 all other like empowered.

**SIGNATURE:** *George Michaelis* 2-5-2007 407-2955140  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #