2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# P05000147138

Entity Name: BLUE SPHERE SERVICES, INC

Current Principal Place of Business:

5950 LAKEHURST DR.
SUITE 216
ORLANDO, FL 32819

New Principal Place of Business:

3956 TOWN CENTER BLVD.
203
ORLANDO, FL 32837

Current Mailing Address:

5950 LAKEHURST DR.
SUITE 216
ORLANDO, FL 32819

New Mailing Address:

3956 TOWN CENTER BLVD.
203
ORLANDO, FL 32837

FEI Number: 20-3728699 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMOS, HECTOR J
5950 LAKEHURST DR.
SUITE 216
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

RAMOS, HECTOR J
3956 TOWN CENTER BLVD.
203
ORLANDO, FL 32837 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: HECTOR J RAMOS 01/06/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: RAMOS, HECTOR J
Address: 5950 LAKEHURST DR.
City-St-Zip: ORLANDO, FL 32819

Title: DV ( ) Delete
Name: SILVA, KARLA J
Address: 5950 LAKEHURST DR.
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: RAMOS, HECTOR J
Address: 3956 TOWN CENTER BLVD. # 203
City-St-Zip: ORLANDO, FL 32837

Title: DV (X) Change ( ) Addition
Name: SILVA, KARLA J
Address: 3956 TOWN CENTER BLVD. # 203
City-St-Zip: ORLANDO, FL 32837

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: HECTOR J RAMOS DP 01/06/2009
Electronic Signature of Signing Officer or Director Date