

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000019602

FILED
Apr 27, 2007
Secretary of State

Entity Name: EASYPARK VALET SYSTEMS, INC.

Current Principal Place of Business:

8665 BOCA GLADES BLVD WEST
UNIT 442A
BOCA RATON, FL 33432 US

Current Mailing Address:

8665 BOCA GLADES BLVD WEST
UNIT 442A
BOCA RATON, FL 33432 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPRA, LEONARDO M
8665 BOCA GLADES BLVD WEST
UNIT 442A
BOCA RATON, FL 33432 US

New Principal Place of Business:

8665 BOCA GLADES BLVD WEST
UNIT 442A
BOCA RATON, FL 33434 US

New Mailing Address:

8665 BOCA GLADES BLVD WEST
UNIT 442A
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: CAPRA, LEONARDO M
Address: 8665 BOCA GLADES BLVD WEST#442A
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: CAPRA, LEONARDO M
Address: 8665 BOCA GLADES BLVD WEST#442A
City-St-Zip: BOCA RATON, FL 33434 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: LEONARDO MOTTA CAPRA

P,D

04/27/2007

Electronic Signature of Signing Officer or Director

Date