## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000022823

Entity Name: A.C. RESTORE SERVICE, INC.

FILED Jun 05, 2007 Secretary of State

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

3675 NW 79 WAY 8270 PINES BLVD

DAVIE, FL 33024 PEMBROKE PINES, FL 33024

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

3675 NW 79 WAY 8270 PINES BLVD

DAVIE, FL 33024 PEMBROKE PINES, FL 33024

FEI Number: 20-4330395 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:

VARGAS, JUAN A BARTICE, ALFREDO E 3675 NW 79 WAY 8270 PINÉS BLVD

DAVIE, FL 33024 US PEMBROKE PINES, FL 33024 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: ALFREDO E BARTICE 06/05/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: **PRFS** (X) Change ( ) Addition VARGAS, JUAN A Name: Name: BARTICE, ALFREDO E

3675 NW 79 WAY 8270 PINES BLVD Address: Address: City-St-Zip: **DAVIE, FL 33024** City-St-Zip: PEMBROKE PINES, FL 33024

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

Name: GONZALEZ, CLAUDIO Name: GONZALEZ, CLAUDIO 3675 NW 79 WAY Address: 7947 JOHNSON STREET APT 8 Address: DAVIE, FL 33024 PEMBROKE PINES, FL 33024 City-St-Zip: City-St-Zip:

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: ALFREDO E BARTICE **PRES** 06/05/2007