2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000035991

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Principal Place of Business

13391 SW 79 ST

MIAMI,, FL 33183

FRANK'S PROPERTY SERVICES, INC.



Mailing Address

13391 SW 79 ST MIAMI,, FL 33183

FILED Mar 06, 2008 08:00 AN Secretary of State



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CR2E034 (11/05) 03032008 No Chg-P

4. FEI Number 20-4491295

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

ZICARES, FRANCISCO J 13391 SW 79 STREET MIAMI, FL 33183

DO NOT WRITE IN THIS SPACE

	ve named entity submits this statement for the pations of registered agent.	urpose of changing its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept					
Signature, typed or printed name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstating) DATE								
	LE NOW!!! FEE IS \$150.00 May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND DIREC	TORS !						
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ZICARES, FRANCISCO J STREET ADDRESS 13391 SW 79 STREET CITY - ST - ZIP MIAMI, FL 33183 TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME

U00000849123 03/21/08-80008-004 150.00

DO NOT WRITE

IN THIS SPACE

I hereby certify that the information supplied with this filling 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 rule 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. 12. I hereby certify that the information supplied with this

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP -1111E+ NAME STREET ADDRESS

Daytime Phone #