## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000039569

Entity Name: AT YOUR SERVICE MOBILE DETAILING, INC.

FILED May 18, 2007 Secretary of State

| Current Principal Place of Business:                         |  | New Principal Place                     | New Principal Place of Business:             |  |
|--|--|---|--|--|
| 15792 SW 24TH STREET<br>PEMBROKE PINES, FL 33082             |  | 15792 SW 24TH STRE<br>MIRAMAR, FL 33027 | EET  |  |
| Current Mailing Address:                                     |  | New Mailing Address                     | <b>::</b>                                    |  |
| PO BOX 825801<br>PEMBROKE PINES, FL                          | . 33082  |   |  |  |
| FEI Number: 20-4529516                                       | FEI Number Applied For()                         | FEI Number Not Applicable ( )           | Certificate of Status Desired (X)            |  |
| Name and Address of  | Current Registered Agent:                        | Name and Address o                      | Name and Address of New Registered Agent:    |  |
| ABREU, ALEXANDER<br>15792 SW 24TH STREI<br>MIRAMAR, FL 33027 |  |   |  |  |
| The above named entity in the State of Florida.              | $\gamma$ submits this statement for the $\gamma$ | ourpose of changing its registered      | d office or registered agent, or both,       |  |
| SIGNATURE:   |  |   |  |  |
| Electro  | onic Signature of Registered Age                 | ent                                     | Date   |  |
|  | 93(2)(b), F.S., the corporation did no           | ot receive the prior notice.            |  |  |
| OFFICERS AND DIRE  | •  | ADDITIONS/CHANGE                        | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title: P VP ( Name: ABREU, ALE)                              | ) Delete<br>(ANDER                               | Title:<br>Name:                         | ( ) Change ( ) Addition                      |  |

Address: PO BOX 825801 Address: City-St-Zip: PEMBROKE PINES, FL 33082 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: ALEXANDER ABREU **PRES** 05/18/2007