

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000039914

FILED  
Feb 27, 2007  
Secretary of State

Entity Name: EL MAMBO MONEY SERVICES, INC.

## Current Principal Place of Business:

2216 WOODS EDGE CIRCLE  
ORLANDO, FL 32817

## New Principal Place of Business:

518 WEST OAKRIDGE RD  
ORLANDO, FL 32809

## Current Mailing Address:

2216 WOODS EDGE CIRCLE  
ORLANDO, FL 32817

## New Mailing Address:

10337 CYPRESS KNEE CIRCLE  
ORLANDO, FL 32825

FEI Number: 20-4573341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVERA, LYLLIANA  
2216 WOODS EDGE CIRCLE  
ORLANDO, FL 32817 US

## Name and Address of New Registered Agent:

RIVERA, LYLLIANA  
10337 CYPRESS KNEE CIRCLE  
ORLANDO, FL 32825 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: LYLLIANA RIVERA

02/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOZANO, OLIVERIO  
Address: 2216 WOODS EDGE CIRCLE  
City-St-Zip: ORLANDO, FL 32817

Title: S (X) Delete  
Name: RIVERA, LYLLIANA  
Address: 2216 WOODS EDGE CIRCLE  
City-St-Zip: ORLANDO, FL 32817

Title: VP (X) Delete  
Name: VASQUEZ, RICARDO  
Address: 9406 LIGHT HOUSE CT  
City-St-Zip: CLERMONT, FL 34711

Title: T (X) Delete  
Name: VASQUEZ, ROSA E  
Address: 9406 LIGHT HOUSE COURT  
City-St-Zip: CLERMONT, FL 34711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: RIVERA, LYLLIANA  
Address: 10337 CYPRESS KNEE CIRCLE  
City-St-Zip: ORLANDO, FL 32825

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LYLLIANA RIVERA

P

02/27/2007

Electronic Signature of Signing Officer or Director

Date