2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# P06000046001

Entity Name: DOUBLEAC IT SERVICES CORP

Current Principal Place of Business:

9003 NW 44TH CT
SUNRISE BROWARD, FL 33351

New Principal Place of Business:

13513 NW 5TH CT
PLANTATION, FL 33325

Current Mailing Address:

9003 NW 44TH CT
SUNRISE BROWARD, FL 33351

New Mailing Address:

13513 NW 5TH CT
PLANTATION, FL 33325

FEI Number: 20-4602903 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGOSTINI, ANTONIO J
9003 NW 44TH CT
SUNRISE BROWARD, FL 33351 US

Name and Address of New Registered Agent:

AGOSTINI, ANTONIO J
13513 NW 5TH CT
PLANTATION, FL 33325 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: ANTONIO J. AGOSTINI 04/28/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: AGOSTINI, ANTONIO J
Address: 9003 NW 44TH CT
City-St-Zip: SUNRISE BROWARD, FL 33351

Title: VT ( ) Delete
Name: RODRIGUEZ-GONZALEZ, ISABEL A
Address: 9003 NW 44TH CT
City-St-Zip: SUNRISE BROWARD, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: AGOSTINI, ANTONIO J
Address: 13513 NW 5TH CT
City-St-Zip: PLANTATION, FL 33325

Title: VT (X) Change ( ) Addition
Name: RODRIGUEZ GONZALEZ, ISABEL A
Address: 13513 NW 5TH CT
City-St-Zip: PLANTATION, FL 33325

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: ANTONIO J. AGOSTINI PS 04/28/2008
Electronic Signature of Signing Officer or Director Date