

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055728

FILED
May 12, 2008
Secretary of State

Entity Name: ACTIVE FINANCIAL SERVICES, INC.

Current Principal Place of Business:

11307 N ARMENIA AV
TAMPA, FL 33612

New Principal Place of Business:

2590 E BEARS AV
TAMPA, FL 33613

Current Mailing Address:

11307 N ARMENIA AV
TAMPA, FL 33612

New Mailing Address:

PO BOX 173224
TAMPA, FL 33672

FEI Number: 20-4729662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIRANDA, MARIA C
1950 HAMMOCK AVE
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

MIRANDA, MARIA C
2590 E BEARS AV
TAMPA, FL 33613 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: MARIA C. MIRANDA

05/12/2008

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:

Title: P () Delete
Name: MIRANDA, MARIA C
Address: 1950 HAMMOCK AVE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIRANDA, MARIA C
Address: 2590 E BEARS AV
City-St-Zip: TAMPA, FL 33613

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: MARIA C MIRANDA

P

05/12/2008

Electronic Signature of Signing Officer or Director

Date