## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000057247

Entity Name: C. L. S. M. SERVICE INC

FILED Jun 17, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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875 SW 113TH WAY 4274 NW 2ND CT

PEMBROKE PINES, FL 33025 FL DEERFIELD BEACH, FL 33442 FL

**Current Mailing Address: New Mailing Address:** 

P O BOX 245086 875 SW 113TH WAY

PEMBROKE PINES, FL 33025 FL PEMBROKE PINES, FL 33024 FL

FEI Number: 20-4753024 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOLORZANO, CARLOS L 4274 NW 2ND COURT DEERFIELD BECH, FL 33442 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:

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

SOLORZANO, CARLOS L SOLORZANO, CARLOS L Name: Name: 875 SW 113TH WAY Address: P O BOX 245086 Address:

City-St-Zip: PEMBROKE PINES, FL 33025 FL City-St-Zip: PEMBROKE PINES, FL 33024 FL

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: CARLOS SOLORZANO **PRES** 06/17/2009