## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000067395

Entity Name: A1 TOTAL MAINTENANCE, CORP.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

403 NE 25 ST 519 NE 72 STREET MIAMI, FL 33137 519 NE 72 STREET MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

403 NE 25 ST 519 NE 72 STREET MIAMI, FL 33137 519 NE 72 STREET MIAMI, FL 33138

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

PATINO, MARIA L
403 NE 25 ST
MIAMI, FL 33137 US

PATINO, MARIA L
519 NE 72 STREET
MIAMI, FL 33138 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 LUISA PATINO 05/02/2007

Electronic Signature of Registered Agent Date

Title:

VPD

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:**

VPD

() Delete

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

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

 Name:
 PATINO, GUSTAVO A
 Name:
 PATINO, GUSTAVO A

 Address:
 403 NE 25 ST
 Address:
 519 NE 72 STREET

 Address:
 403 NE 25 ST
 Address:
 519 NE 72 STREET

 City-St-Zip:
 MIAMI, FL 33137
 City-St-Zip:
 MIAMI, FL 33138

 Name:
 PATINO, MARIAVO L
 Name:
 PATINO, MARIA L

 Address:
 403 NE 25 ST
 Address:
 519 NE 72 STREET

 City-St-Zip:
 MIAMI, FL 33137
 City-St-Zip:
 MIAMI, FL 33138

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

 Name:
 PATINO, DOLORES
 Name:
 PATINO, DOLORES

 Address:
 403 NE 25 ST
 Address:
 519 NE 72 STREET

 City-St-Zip:
 MIAMI, FL 33137
 City-St-Zip:
 MIAMI, FL 33138

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 LUISA PATINO VPD 05/02/2007