2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000092188

Entity Name: ANGEL'S MULTISERVICES CORP

FILED Mar 17, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business:	New Principal Place of Business:
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2399 NE 137TH STREET 2360 NE 136TH TERRACE NORTH MIAMI BEACH, FL 33181 NORTH MIAMI BEACH, FL 33181

Current Mailing Address: New Mailing Address:

2399 NE 137TH STREET 2360 NE 136TH TERRACE NORTH MIAMI BEACH, FL 33181 NORTH MIAMI BEACH, FL 33181

FEI Number: 20-5198102 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:

LEON, NAZARENO L
2399 NE 137TH STREET
NORTH MIAMI BEACH, FL 33181 US
LEON, NAZARENO L
2360 NE 136TH TERRACE
NORTH MIAMI BEACH, FL 33181 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: 03/17/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

 Name:
 LEON, NAZARÉNO L
 Name:
 LEON, NAZARÉNO L

 Address:
 2399 NE 137TH STREET
 Address:
 2360 NE 136TH TERRACE

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33181
 City-St-Zip:
 NORTH MIAMI BEACH, FL 33181

Title: () Delete Title: VPD () Change (X) Addition
Name: MARCONI CFCILIA V

 Name:
 Name:
 MARCONI, CECILIA V

 Address:
 Address:
 2360 NE 136TH TERRACE

 City-St-Zip:
 City-St-Zip:
 NORTH MIAMI BEACH, FL 33181

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: NAZARENO L LEON PD 03/17/2007