## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000102228

Address:

City-St-Zip:

583 PONDELLA RD UNIT C

NORTH FORT MYERS, FL 33903 US

Entity Name: MULTI-SERVICIOS LEGALES, INC.

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
583 PONDE	ELLA RD				
UNIT C					
N. FORT M	YERS, FL 33	903			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
583 PONDE	ELLA RD				
UNIT C N. FORT M	YERS, FL 33	903			
FEI Number: 2	20-5324333	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
583 PONDE UNIT C	UILLERMO E ELLA RD AL, FL 3390:				
The above r		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	E:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Cam	paign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	Р (	) Delete	Title: (	) Change ( ) Addition	
Name:	TEJADA, GUILI	_ERMO E	Name:		
Address:	583 PONDELL		Address:		
City-St-Zip:	NORTH FORT	MYERS, FL 33903 US	City-St-Zip:		
Title:	VP (	) Delete	Title: (	) Change ()Addition	
Name:	VARGAS, MAR	GARITA	Name:		
Address:	583 PONDELL		Address:		
City-St-Zip:	NORTH FORT	MYERS, FL 33903 US	City-St-Zip:		
Title:	s (	) Delete	Title: (	) Change ( ) Addition	
Name:	REYES, LUIS N	Л	Name:		

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.

Address:

City-St-Zip:

SIGNATURE: GUILLERMO E TEJADA P 03/10/2009