2007 FOR PROFIT CORPORATION ANNUAL REPORT

4/25/2007-90203-033-\$158.75-\$158.75

DOCUMENT # P06000128824

1. Entity Name

A & MI UNIVERSAL SERVICES CENTER, INC



FILED 07 MAY 22 PM 2: 29

O STOUT STATE TALLAHARS E, L'ENIDA Principal Place of Business Mailing Address P.O. BOX 126983 1655 WEST 44TH PL HIALEAH, FL 33012 US 247 HIALEAH, FL 33012 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Sulte, Apt. #, etc. Suite, Apt. #, etc. 04232007 Chg-P CR2E034 (12/06) Applied For City & State City & State 4. FEI Number Not Applicable Žip Country \$8.75 Additional Zio Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CONTRERAS, MARIA INES Street Address (P.O. Box Number is Not Acceptable) 1655 WEST 44TH PL HIALEAH, FL 33012 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or presed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when rematiting) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10, 11. TITLE ☐ Change ☐ Addition TILLE ☐ Delete CONTRERAS, MARIA I NAME NAME 1655 WEST 44TH PL, APT 247 STREET ADDRESS STIEFT ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 PITY-ST-749 Delete TITLE Change ☐ Addition TITLE CARRO GARCIA, SERGIO A NAME NAME 1855 WEST 44TH PL, APT 247 STREET ADDRESS STIEET ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 017-51-74 Delete me ☐ Change ☐ Addition TITLE CONTRERAS, MARIA I HAME STREET ADDRESS 1655 WEST 44TH PL, APT 247 STREET ADDRESS CISY-SI-ZP HIALEAH, FL 33012 (20Y-51-70) ☐ Delete MILE ☐ Change ☐ Addition MILE CARRO GARCIA, SERGIO A NAME NUE 1655 WEST 44TH PL APT 247 STREET ADORESS STREET ADDRESS CATY-ST-ZIP CTTY-ST-ZIP HIALEAH, FL 33012 ☐ Change TITLE ☐ Delete 1971 F ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete MILE TITLE Change ■ Addition NUME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with the filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an eddress, with all objective empowered. SIGNATURE: _