2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131692

Entity Name: NATIONAL FULFILLMENT SERVICES, INC

FILED Jan 16, 2007 Secretary of State

Littly Nai	IIE. NATIONAL	FOLFILLIVILINI SERVICES, I	INC			
Current Principal Place of Business:				New Principal Place of Business:		
1511 PROSPERITY FARMS RD 100			618 HWY US 1 401			
LAKE PARK, FL 33403			N PALM BEACH, FL 33408			
Current Mailing Address:				New Mailing Address:		
1511 PROSPERITY FARMS RD				618 HWY US 1 401		
100 LAKE PARK, FL 33403			N PALM BEACH, FL 33408			
FEI Number:	lumber: FEI Number Applied For (X)		FEI Nun	Imber Not Applicable () Certificate of Status De		Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
TRACY, J STEPHEN 1511 PROPSERITY FARMS ROAD 100				TRACY LAW FIRM PA 1511 PROPSERITY FARMS ROAD 100		
LAKE PARK, FL 33403 US				LAKE PARK, FL 33403 US		
The above in the State		bmits this statement for the po	urpose o	f changing it	ts registere	ed office or registered agent, or both,
SIGNATURE: J STEPHEN TRACY				01/16/2007		
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing 1	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () D MARY BETH MCN 1511 PROSPERI LAKE PARK, FL	TY FARMS RD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VP () D TRACY, JOHN 1511 PROSPERI LAKE PARK, FL			Title: Name: Address: City-St-Zip:		(X) Change()Addition HN SPERITY FARMS RD K, FL 33403
Title: Name: Address: City-St-Zip:	() [elete		Title: Name: Address: City-St-Zip:		() Change (X) Addition BRIAN ISON WILSON RD CH, FL 33408

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: BRIAN WELLS P 01/16/2007