## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000143205

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

VALRICO, FL 33594 US

VALRICO, FL 33594 US

1307 KEEL PLACE

(X) Delete

LOS ANGELES PADILLA, MARIA DE

Name: FIRST CHOICE OLIVLITY SERVICES INC

FILED Mar 13, 2008 Secretary of State

Entity Nar	ne: FIRST	SHOICE QUALIT	Y SERVICES, INC	<b>∪</b> .				
Current Principal Place of Business:				New Principal Place of Business:				
1307 KEEL VALRICO,		US						
Current Mailing Address:				New Mailing Address:				
1307 KEEL VALRICO,		US						
FEI Number:	20-5907829	FEI Number Ap	plied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desire	ed ( )	
Name and	Address of	Current Registe	ered Agent:	Name and	Address	of New Registered Agent:		
MASS, HE 1307 KEEL VALRICO,	. PLACE	US						
The above in the State		y submits this stat	ement for the pu	rpose of changing i	ts registere	ed office or registered agent,	or both,	
SIGNATUR	RE:							
	Electr	onic Signature of	Registered Agen	t		Date		
Election Can	npaign Financ	ing Trust Fund Cont	ribution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P/D MASS, HERN 1307 KEEL F VALRICO, FL	PLACE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title: Name: Address:	VP/D VAZQUEZ, LI 1307 KEEL F			Title: Name: Address:	S LOS ANGE 1307 KEEL	(X) Change()Addition LES PADILLA, MARIA DE PLACE		

City-St-Zip: VALRICO, FL 33594 US

() Change () Addition

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: HERMINIO MASS P 03/13/2008