

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000028723

Entity Name: FALCOVEN SERVICE CORP.

FILED
Sep 03, 2008
Secretary of State

Current Principal Place of Business:

7416 SW 162 CT
MIAMI, FL 33193

New Principal Place of Business:

15274 SW 104 ST
712
MIAMI, FL 33193

Current Mailing Address:

7416 SW 162 CT
MIAMI, FL 33193

New Mailing Address:

8006 SW 149 AVE
D202
MIAMI, FL 33193

FEI Number: 20-8570270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, MAGLIS
7416 SW 162 CT
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

COHEN, MAGLIS
15274 SW 104 ST
712
MIAMI, FL 33196 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:

09/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COHEN, MAGLIS
Address: 7416 SW 162 CT
City-St-Zip: MIAMI, FL 33193

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COHEN, MAGLIS
Address: 15274 SW 104 ST # 712
City-St-Zip: MIAMI, FL 33196

Title: A () Change (X) Addition
Name: COHEN, LUIS
Address: 15274 SW 104 ST
City-St-Zip: MIAMI, FL 33196

Title: S () Change (X) Addition
Name: ELIZABETH, DE COHEN
Address: 15274 SW 104 ST
City-St-Zip: MIAMI, FL 33196

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.

SIGNATURE: MAGLIS COHEN

P

09/03/2008

Electronic Signature of Signing Officer or Director

Date