2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000031700

Entity Name: W & A SERVICES INC

City-St-Zip:

JACKSONVILLE, FL 32246 US

FILED Jul 16, 2008 Secretary of State

yu.	iidi Waxali	VICEO IIVC						
Current Principal Place of Business:				New Principal Place of Business:				
9745 TOU	CHTON RD			6043 10TH 129	AVE N			
	VILLE, FL 32246	US		. — -	CRES, FL 3	3463	US	
Current Mailing Address:				New Mailing Address:				
9745 TOUCHTON RD				6043 10TH AVE N				
503 JACKSONVILLE, FL 32246 US				129 GREEN ACRES, FL 33463 US				
FEI Number:	:	FEI Number Applied For (X)	FEI Num	ber Not Appl	icable ()	Certif	icate of Status D	esired ()
Name and	Address of Cui	rent Registered Agent:		Name and	Address of	f New R	egistered Age	ent:
503	MARTA CHTON RD VILLE, FL 32246	S US						
	named entity sub of Florida.	omits this statement for the p	purpose of	changing i	ts registered	d office o	r registered ag	gent, or both,
SIGNATUF	RE:							
Electronic Signature of Registered Agent				Date				
)(b), F.S., the corporation did no	ot receive th	ne prior notic	e.			
OFFICERS	S AND DIRECTO	PRS:		ADDITION	S/CHANGE	s to o	FFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	P () De ASENCIO, MARTA 9745 TOUCHTON JACKSONVILLE, F	RD #503		Title: Name: Address: City-St-Zip:	VP ASENCIO, M 9745 TOUCH JACKSONVII	IARTA ITON RD i		
Title: Name: Address: City-St-Zip:	VP () De SORIANO, WEND 9745 TOUCHTON JACKSONVILLE, F	Y M RD #503		Title: Name: Address: City-St-Zip:	P SORIANO, V 6043 10TH A GREEN ACR	VENDY M VE N #12		
Title: Name: Address:	S () De ASENCIO, TONY 9745 TOUCHTON			Title: Name: Address:		() Chang	e () 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.

City-St-Zip:

SIGNATURE: MARTA ASENCIO VP 07/16/2008