

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000044140

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: PALM COAST VALET & CLEANING SERVICES, INC.

**Current Principal Place of Business:**

7802 HOFFEY CIRCLE  
LAKEWORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

7802 HOFFEY CIRCLE  
LAKEWORTH, FL 33467

**New Mailing Address:**

PO BOX 541811  
GREENACRES, FL 33454

FEI Number: 20-8885021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMSTER, MORTON  
10058 SPANISH ISLES BLVD, SUITE F7  
BOCA RATON, FL 33498 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GENOVESE, KIMBERLY  
Address: 6013 10TH AVE N #205  
City-St-Zip: GREENACRES, FL 33463

Title: T ( ) Delete  
Name: KADEN, WALTER  
Address: 7802 HOFFEY CIRCLE  
City-St-Zip: LAKEWORTH, FL 33467

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: ALMEIDA, JOSE M  
Address: 6013 10TH AVE N #205  
City-St-Zip: GREENACRES, FL 33463

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: KIMBERLY GENOVESE

P

01/11/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date