

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000094725

FILED  
May 05, 2008  
Secretary of State

Entity Name: AMC HANDY SERVICES, INC.

## Current Principal Place of Business:

7603 ARBLE DR., #C  
JACKSONVILLE, FL 32211

## New Principal Place of Business:

11110 ATLANTIC BLVD  
APT 1001  
JACKSONVILLE, FL 32225

## Current Mailing Address:

7603 ARBLE DR., #C  
JACKSONVILLE, FL 32211

## New Mailing Address:

11110 ATLANTIC BLVD  
APT 1001  
JACKSONVILLE, FL 32225

FEI Number: 36-4614777

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASTILLO, MICKIE  
7603 ARBLE DR., #C  
JACKSONVILLE, FL 32211 US

## Name and Address of New Registered Agent:

CASTILLO, MICKIE  
11110 ATLANTIC BLVD  
APT 1001  
JACKSONVILLE, FL 32225 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: MICKIE CASTILLO

05/05/2008

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: PVD ( ) Delete  
Name: CASTILLO, MICKIE  
Address: 7603 ARBLE DR., #C  
City-St-Zip: JACKSONVILLE, FL 32211

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: CASTILLO, MICKIE  
Address: 11110 ATLANTIC BLVD APT 1001  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Change (X) Addition  
Name: CESAR, BARRIOS  
Address: 11110 ATLANTIC BLVD APT 1001  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Change (X) Addition  
Name: ANDREY, BARRIOS  
Address: 11110 ATLANTIC BLVD APT 1001  
City-St-Zip: JACKSONVILLE, FL 32225

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: MICKIE CASTILLO

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date