

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2008 8:00 am
Secretary of State

04-15-2008 90017 024 ***150.00

DOCUMENT # P07000127679	
1. Entity Name TERRAE FILIUS PARALEGAL AND MULTI SERVICES INC.	

Principal Place of Business 600 WEST OAKRIDGE ROAD E ORLANDO, FL 32809 US	Mailing Address 600 WEST OAKRIDGE ROAD E ORLANDO FL 32809 US
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66010030



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/07)

4. FEI Number 26-1830551		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SAINTIL, RAYMOND 7421 BROCK BANK DR. ORLANDO FL 32809		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and state if applicable.

NOTE: Registered Agent signature required when transferring.

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SAINTIL, RAYMOND 7421 BROCK BANK DR ORLANDO FL 32809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE:

Raymond Saintil
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/2008 407-577-9009
Date
Telephone Number

ATTACHMENT
66010030

TERRAE FILIUS PARALEGAL & MULTI-SERVICES, *inc.*

600 WEST OAKRIDGE ROAD # E
ORLANDO, FLORIDA 32809

Reference number: P07000127679

Orlando, May 5, 2008

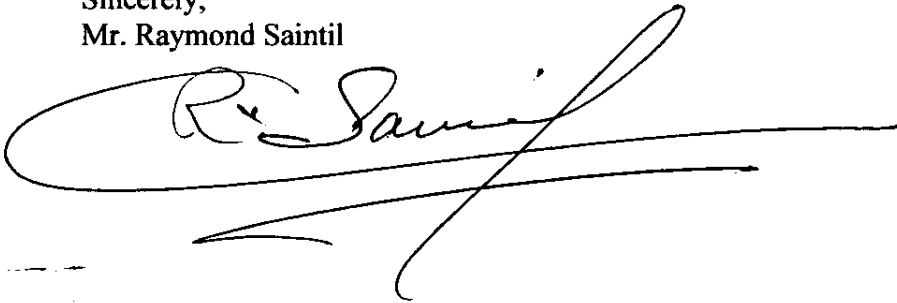
Dear Sir or Madam,

I am so sorry that I forgot to put the FEI number. I did that by mistake, please forgive me
.Now everything has been taking care of.

Thank you for the correction in this matter.

Sincerely,

Mr. Raymond Saintil

A handwritten signature in black ink, appearing to read 'R. Saintil', with a long horizontal line extending to the right.