2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2008
Secretary of State

DOCUMENT# P08000003087

Entity Name: A & M MOBILE BAR SERVICES, INC.

Current Principal Place of Business:

1892 US HIGHWAY 1 UNIT 156
ROCKLEDGE, FL 32937

New Principal Place of Business:

1892 US HIGHWAY 1 UNIT 156
ROCKLEDGE, FL 32955

Current Mailing Address:

1892 US HIGHWAY 1 UNIT 156
ROCKLEDGE, FL 32937

New Mailing Address:

1892 US HIGHWAY 1 UNIT 156
ROCKLEDGE, FL 32955

FEI Number: 26-1753058 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWITZER, MICHAEL O
1892 US HIGHWAY 1 UNIT 156
ROCKLEDGE, FL 32937 US

Name and Address of New Registered Agent:

SWITZER, MICHAEL O
1892 US HIGHWAY 1 UNIT 156
ROCKLEDGE, FL 32955 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: _____ 07/17/2008
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: DP ( ) Delete
Name: SWITZER, MICHAEL O
Address: 1906 WOODHAVEN CIRCLE UNIT 19
City-St-Zip: ROCKLEDGE, FL 32955

Title: DST ( ) Delete
Name: MORRIS, ANNA M
Address: 1906 WOODHAVEN CIRCLE UNIT 19
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MICHAEL O SWITZER DP 07/17/2008
Electronic Signature of Signing Officer or Director — Date