

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000104064

Entity Name: FISHEYE SERVICES, INC.

**FILED**  
**Mar 27, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

18846 TRACER DRIVE  
LUTZ, FL 33549

## **New Principal Place of Business:**

36933 CHRISTIAN RD  
DADE CITY, FL 33523

## **Current Mailing Address:**

P.O. BOX 2426  
LUTZ, FL 33548

## **New Mailing Address:**

P.O. BOX 1601  
DADE CITY, FL 33523

FEI Number: 26-3803317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOSTER, JONATHAN R  
18846 TRACER DRIVE  
LUTZ, FL 33549 US

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

FOSTER, JONATHAN R  
36933 CHRISTIAN RD  
DADE CITY, FL 33523 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: JONATHAN R FOSTER

03/27/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PTS  
Name: FOSTER, JONATHAN R  
Address: 36933 CHRISTIAN RD  
City-St-Zip: DADE CITY, FL 33523

I hereby 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 all other like empowered.

SIGNATURE: JONATHAN R FOSTER

PTS

03/27/2010

Electronic Signature of Signing Officer or Director

Date