

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000094481

Entity Name: CJS SERVICES CORP

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5174 MILLENIA BLVD.  
202  
ORLANDO, FL 32839

**New Principal Place of Business:**

**Current Mailing Address:**

5174 MILLENIA BLVD.  
202  
ORLANDO, FL 32839

**New Mailing Address:**

FEI Number: 27-1372539

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DA SILVA, CARLOS J  
5174 MILLENIA BLVD  
APT. 202  
ORLANDO, FL 32839 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DA SILVA, CARLOS J  
Address: 5174 MILLENIA BLVD, APT 202  
City-St-Zip: ORLANDO, FL 32839

Title: VP  
Name: DA SILVA, ERIVELTON F  
Address: 5174 MILLENIA BLVD APT 202  
City-St-Zip: ORLANDO, FL 32839

Title: T  
Name: SERRENO, ADRIAN VIDAL H  
Address: 2527 WEST OAKRIDGE RD APT 1205  
City-St-Zip: ORLANDO, FL 32809

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: CARLOS JOSE DA SILVA

P

02/23/2011

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

\_\_\_\_\_  
Date