

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000092471

Entity Name: CSR MULTI-SERVICES INC.

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1896 ELOISE COVE DRIVE  
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

322 S 1 STREET  
LAKE WALES, FL 33853

**Current Mailing Address:**

P.O. BOX 1753  
WINTER HAVEN, FL 33882

**New Mailing Address:**

FEI Number: 36-4682349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CRUZ, MARIBEL  
1880 ELOISE COVE DRIVE  
WINTER HAVEN, FL 33884 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,T  
Name: FERREIRA PEREZ, ROSA  
Address: P.O. BOX 1753  
City-St-Zip: WINTER HAVEN, FL 33882

Title: VP,S  
Name: PEREZ, JUAN M  
Address: P.O. BOX 1753  
City-St-Zip: WINTER HAVEN, FL 33882

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: ROSA FERREIRA PEREZ

P.T

04/05/2011

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

\_\_\_\_\_  
Date