

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P17822

FILED
Feb 21, 2008
Secretary of State**Entity Name:** PARARA SERVICES, INC.**Current Principal Place of Business:**602 W INDIAN RIVER BLVD
STE 6
EDGEWATER, FL 32132 US**New Principal Place of Business:****Current Mailing Address:**602 W INDIAN RIVER BLVD
STE 6
EDGEWATER, FL 32132 US**New Mailing Address:****FEI Number:** 58-1762446**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEOS () Delete
Name: HARDMAN, LOLA L.,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

Title: PTD () Delete
Name: HARDMAN, JOSEPH E.,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

Title: V () Delete
Name: ATWELL, BOBBY D.,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

Title: V () Delete
Name: SZATMARY, KEVIN,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PTD (X) Change () Addition
Name: HARDMAN, LOLA L.,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

Title: V (X) Change () Addition
Name: HARDMAN, BETTY JO,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

Title: SEC (X) Change () Addition
Name: HARDMAN, BETTY JO,
Address: 602 W INDIAN RIVER BLVD STE 6
City-St-Zip: EDGEWATER, FL 32132

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: LOLA L. HARDMAN

PDT

02/21/2008

Electronic Signature of Signing Officer or Director

Date