

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000059286

Entity Name: PALM SELF SERVICE, INC.

FILED
Feb 21, 2009
Secretary of State

Current Principal Place of Business:

740 ALTON ROAD
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

740 ALTON ROAD
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0440206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHPILMAN, MIHAIL
740 ALTON ROAD
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHPILMAN, MIHAIL
Address: 740 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: SHPILMAN, LIOUDMILA
Address: 740 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

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: MIHAIL SHPILMAN

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02/21/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date