

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000013520

**FILED
May 01, 2005
Secretary of State**

Entity Name: CHOICE SERVICES CORPORATION

Current Principal Place of Business:

5389 NW 188TH ST
CAROL CITY, FL 33055

New Principal Place of Business:

Current Mailing Address:

5389 NW 188TH ST
MIAMI, FL 33015 US

New Mailing Address:

FEI Number: 65-0560537 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

OKPALA, COLUMBA
20050 N.W. 65TH COURT
MIAMI, FL 33015 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: OKPALA, COLUMBA
Address: 20050 N.W. 65TH COURT
City-St-Zip: MIAMI, FL 33015

Title: VTD () Delete
Name: OKPALA, COLUMBA
Address: 5389 NW 188TH ST
City-St-Zip: CAROL CITY, FL 33055

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 for the exemption stated in Section 119.07(3)(i), 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: COLUMBA OKPALA

PRES

05/01/2005

Electronic Signature of Signing Officer or Director

_____ Date