2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # P97000055499** 1. Entity Name AVONDALE TECHNOLOGY SERVICES, INC. Principal Place of Business Mailing Address 3832 OAK ST 3832 OAK ST JACKSONVILLE, FL. 32205 JACKSONVILLE, FL 32205 No Chg-P CR2E034 (11/05) 04242008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3454314 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROBEYSEK, JAMES W JR. DO NOT WRITE 3832 OAK ST JACKSONVILLE, FL 32205 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent agnature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Feet OFFICERS AND DIRECTORS 10. DPST TITLE ROBEYSEK, JAMES W.JR. NAME STREET ADDRESS **3832 OAK ST** CITY-ST-ZIP JACKSONVILLE, FL 32205 TITLE 000000924815 05/20/08-80002-010/150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CMY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all/otherslike er/powered.

SIGNATURE:

ATURE AND TYPED OR PROTECTIONAME OF BIGNING OFFICER OR DIRECTO

4/24/08 904388-7061

Daytime Phone #

FILED