

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000099358

Entity Name: SSA SERVICES, INC.

FILED
May 13, 2008
Secretary of State

Current Principal Place of Business:

963 N. KROME AVE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

8 PALMS PLAZA
HOMESTEAD, FL 33030 US

Current Mailing Address:

963 N KROME AVE
HOMESTEAD, FL 33030 US

New Mailing Address:

8 PALMS PLAZA
HOMESTEAD, FL 33030 US

FEI Number: 65-0796017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AURY DISTEFANO
1684 NW 20 ST
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

AURY A LOURENCO
1684 NW 20 ST
HOMESTEAD, FL 33030 US

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: AURY A LOURENCO

05/13/2008

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: P () Delete
Name: DISTEFANO, AURY
Address: 1684 NW 20 ST
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOURENCO, AURY A
Address: 1684 NW 20 ST
City-St-Zip: HOMESTEAD, FL 33030

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: AURY A LOURENCO

PR

05/13/2008

Electronic Signature of Signing Officer or Director

Date