2008 FOR PROFIT CORPORATION ANNUAL REPORT					FILED Feb 15, 2008 08:00 AN			
DOCUMENT # P98000019966 1. Entity Name KENDALL PROCESS SERVERS, INC.					S	becretar	y of State	
Principal Plac 8701 SW 13 STE 307 MIAMI, FL 3	7TH AVE	Mailing Address POST OFFICE BOX 960640 MIAMI, FL 33296				II ARKI INI JULIA	RANA ANA ANA ANA ANA ANA ANA ANA ANA ANA	
				02072008	No Chg-P	CR2E034 (11		
	O NOT WRITE	IN THIS SPA	CE	<ol> <li>FEI Numbe 65-081</li> <li>Certificate</li> </ol>		□ \$8.7	Applied For Not Applicable 5 Additional	
	6. Name and Address of Current Re	gistered Agent				A WAR WAR		
8701 SW 1	N, STUART L 137TH AVE			DO,	NOT W	RITE		
STE 307 MIAMI, FL	. 33183			i IN T	THIS SF	PACE		
<ul> <li>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. 1 am familiar with, and accept the obligations of registered agent.</li> <li>SIGNATURE</li> </ul>								
3 14 <sup>7</sup>	Signature, typed or printed name of registered agent and	1	ed Agent signature required		U00000	)828512 ·~	1	
FiL After M	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	<ol> <li>Election Campaign Fina Trust Fund Contribution</li> </ol>		.00 May Be ed to Fees	02/26/08-	-80004-009	150.00	
<b>10.</b> TITLE	OFFICERS AND DI	RECTORS		W, Peste				
NAME Street address City-St-Zip	TOCKMAN, YOLANDA V 8701 SW 137TH AVE STE 307 MIAMI, FL 33183							
TITLE NAME STREET ADDRESS								
CITY-ST-ZIP TITLE		· ·	-	·哈·哈·				
NAME STREET ADDRESS City-st-zip				DÖ	NOT W	/RITE		
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TITLE NAME 'STREET ADDRESS CITY-ST-2IP		· · · ·						
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 Arustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if								
	t, or on an attachment witt an eddress, wit	h all other like empowered. <u>Hotonoo tookn</u>	n <u>C</u> b		11108	305.7	152.2145	
SCHATOFIE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Date Deviling Phone 4								

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