## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000080663

Entity Name: SPLENDOR SERVICES, INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2868 SW 177TH AVE 4257 SW 130TH AVENUE MIRAMAR, FL 33029 MIRAMAR, FL 33027 US

Current Mailing Address: New Mailing Address:

2868 SW 177TH AVE PO BOX 173805

MIRAMAR, FL 33029 HIALEAH, FL 33017 US

FEI Number: 52-2122473 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESCOBAR, NELSON
2868 SW 177TH AVE
MIRAMAR, FL 33029 US
ESCOBAR, NELSON
4257 SW 130TH AVENUE
MIRAMAR, FL 33027 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: 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: ESCOBAR, NELSON Name: ESCOBAR, NELSON

 Address:
 2868 SW 177TH AVE
 Address:
 4257 SW 130TH AVENUE

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33027 US

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: ESCOBAR, MARIA Name: ESCOBAR, GLADYS

 Address:
 2868 SW 177 AVE.
 Address:
 4257 SW 130TH AVENUE

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33027 US

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ESCOBAR, JAIRO
 Name:

 Address:
 2868 SW 177 AVE.
 Address:

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:

Title: VD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ESCOBAR, GLADYS
 Name:

 Address:
 315 SW 181 WAY
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 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: NELSON ESCOBAR D 04/30/2005