

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 546635

FILED
May 01, 2006
Secretary of State

Entity Name: PROFESSIONAL MASS MARKETING INTERNATIONAL, INC.

Current Principal Place of Business:

1400 NW 107TH AVE., STE 209
MIAMI, FL 33172

New Principal Place of Business:

3400 CORAL WAY
STE 603
MIAMI, FL 33145

Current Mailing Address:

1400 NW 107TH AVE., STE 209
MIAMI, FL 33172

New Mailing Address:

3400 CORAL WAY
STE 603
MIAMI, FL 33145

FEI Number: 59-1462668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, ROBERT S
1400 NW 107TH AVE., #209
MIAMI, FL 33172 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: P () Delete
Name: NEUMANN,ROBERT S.,
Address: 6 PALERMO AVE STE 100
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NEUMAN,ROBERT S.,
Address: 3400 CORAL WAY STE 603
City-St-Zip: MIAMI, FL 33145

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT NEUMAN

PRES

05/01/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date