


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 16, 2008 8:00 am
Secretary of State

05-16-2008 90185 001 ***750.00

DOCUMENT # S41709
 1. Entity Name
INTER-PRO FINANCIAL, INC.



Principal Place of Business Mailing Address
2205 HOLLYWOOD BLVD. **2205 HOLLYWOOD BLVD.**
HOLLYWOOD FL 33020 **HOLLYWOOD FL 33020**

0001U000



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
65-0263081 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
INTER "PRO" HOLDING, INC.
2205 HOLLYWOOD BLVD
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	LANGBAUM, MADELINE	
STREET ADDRESS	2205 HOLLYWOOD BLVD.	
CITY-ST-ZIP	HOLLYWOOD FL	
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STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 empowered 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 other like empowered.

SIGNATURE: *Madeline Langbaum* Date: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Days/Phone #