

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 443427

FILED
Jan 22, 2009
Secretary of State

Entity Name: PROFESSIONAL TRANSLATING SERVICES, INC.

Current Principal Place of Business:

44 W. FLAGLER STREET
SUITE 1800
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

44 W. FLAGLER STREET
SUITE 1800
MIAMI, FL 33130

New Mailing Address:

FEI Number: 59-1567380 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUIMET, JUAN P
1221 BRICKELL AVENUE
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CBD () Delete
Name: DE LA VEGA, LUIS,
Address: 44 WEST FLAGLER ST, SUITE 1800
City-St-Zip: MIAMI, FL 33130

Title: PDS () Delete
Name: DE LA VEGA, MARIA C,
Address: 44 WEST FLAGLER STREET, SUITE 1800
City-St-Zip: MIAMI, FL 33130

Title: VAS () Delete
Name: DE LA VEGA, LUIS R
Address: 44 WEST FLAGLER STREET, SUITE 1800
City-St-Zip: MIAMI, FL 33130

Title: VAS () Delete
Name: ESTEFANI, CARLOS
Address: 44 WEST FLAGLER STREET, SUITE 1800
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUIS DE LA VEGA

VAS

01/22/2009

Electronic Signature of Signing Officer or Director

Date