

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000024480

Entity Name: PROFESSIONAL SERVICE EXCELLENT BENEFITS INC.

Current Principal Place of Business:

4796 WARRIOR LANE
KISSIMMEE, FL 34746

Current Mailing Address:

P.O.BOX 422822
KISSIMMEE, FL 34742 US

FEI Number: 27-2165784

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPS
Name SOTKA, PAVEL
Address 4796 WARRIOR LANE
City-State-Zip: KISSIMMEE FL 34746

I hereby 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 all other like empowered.

SIGNATURE: PAVEL SOTKA

PRESIDENT

03/25/2014

Electronic Signature of Signing Officer/Director Detail

Date