

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2008 8:00 am
Secretary of State

03-14-2008 90044 045 ***150.00

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1. Entity Name

PROFESSIONAL BUSINESS ENTERPRISES, INC.



Principal Place of Business

8810 SW 123 CT M-208
MIAMI FL 33186
US

Mailing Address

8810 SW 123 CT M-208
MIAMI FL 33186
US

2. Principal Place of Business - No P.O. Box #

1630 NW 17 AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

MIAMI - FLORIDA

City & State

4. FEI Number

59-1696841

Applied For

Not Applicable

Zip

33125

Country

USA

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, CARMEN
3810 SW 123 CT M-208
MIAMI FL 33186

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

Signature, typed or printed name of registered agent and date. If applicable.

(MOORE Registered Agent signature required when submitting)

DATE

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

TITLE TDP ☐ Delete
NAME GONZALEZ, CARMEN
STREET ADDRESS 16 SW 40 AVE
CITY-ST-ZIP MIAMI FL 33134

TITLE S ☐ Delete
NAME GONZALEZ, CARMEN
STREET ADDRESS 16 SW 40 AVE
CITY-ST-ZIP MIAMI FL 33134

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8810 SW 123 CT M-208
CITY-ST-ZIP MIAMI FL 33186

TITLE ☐ Change ☐ Addition
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STREET ADDRESS 8810 SW 123 CT M-208
CITY-ST-ZIP MIAMI FL 33186

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Carmen Gonzalez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/14/2008 (35)297-7245