2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 12, 2007 08:00 AM Secretary of State **DOCUMENT #639344** 1. Entity Name PRESERVATION SERVICES, INC. Principal Place of Business Mailing Address 2601 EAST 7TH AVENUE 2601 EAST 7TH AVENUE TAMPA, FL 33605 TAMPA, FL. 33605 No Chg-P CR2E034 (11/05) 02122007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 59-1957674 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORRISON, ANDREWS DO NOT WRITE 11824 HADLEIGH WAY **TRINITY, FL 34655** IN THIS SPACE 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 little if applicable. (NOTE: Registered Agent & gnature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS CEO TITE E MORRISON, ANDREW S. NAME STREET ADDRESS 11824 HADLEIGH WAY CITY-ST-ZIP TRINITY, FL. 34655 U00000700449 04/20/07-80019-001 158.75 TITLE BRIGHT, STEPHEN M NAME STREET ADDRESS 6105 2ND ST. SOUTH CITY-ST-ZIP SAINT PETERSBURG, FL 33705 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

I hereby certify that the information supplied with this filing/does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report in true find 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 amobiving the 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 at adverse, with all other like empowered.

STREET ADDRESS CITY ST-ZIP

> SIGNATURE MID T MONING OFFICER OR DIRECTOR