2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# F00000002695

Entity Name: BUSINESS ADVISORY SERVICES, INC.

Current Principal Place of Business:

7025 BERACASA WAY STE 105 H
BOCA RATON, FL 33433

New Principal Place of Business:

7025 BERACASA WAY
105 H
BOCA RATON, FL 33433

Current Mailing Address:

7025 BERACASA WAY STE 105 H
BOCA RATON, FL 33433

New Mailing Address:

7025 BERACASA WAY
105 H
BOCA RATON, FL 33433

FEI Number: 52-0979328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KRASSENSTEIN, J.D.
21301 POWERLINE RD., STE 309
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

KRASSENSTEIN, JEROME D
7025 BERACASA WAY
105 H
BOCA RATON, FL 33433 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: J. D. KRASSENSTEIN 01/20/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPT ( ) Delete
Name: KRASSENSTEIN, J.D.
Address: 7025 BERACASA WAY STE 05H
City-St-Zip: BOCA RATON, FL 33433

Title: VC ( ) Delete
Name: KRASSENSTEIN, JONATHAN T
Address: 918 DALE AVE.
City-St-Zip: BRADFORD WOODS, PA 15015

Title: D ( ) Delete
Name: KRASSENSTEIN, DANIEL M
Address: 2000 SHORE RD. STE #205
City-St-Zip: LINWOOD, NJ 08221

Title: D ( ) Delete
Name: KRASSENSTEIN, VELMA C
Address: 2396 TIMBERCREEK CIRCLE
City-St-Zip: BOCA RATON, FL 33431

Title: S ( ) Delete
Name: KRASSENSTEIN, JULIET
Address: 918 DALE AVE.
City-St-Zip: BRADFORD WOODS, PA 15015

Title: D ( ) Delete
Name: NIESON, RUTH
Address: 1611 SWEETBRIAR RD.
City-St-Zip: GLADWYNE, PA 19035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPT (X) Change ( ) Addition
Name: KRASSENSTEIN, J.D.
Address: 7025 BERACASA WAY STE 105H
City-St-Zip: BOCA RATON, FL 33433

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:

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: JEROME D. KRASSENSTEIN CPT 01/20/2009
Electronic Signature of Signing Officer or Director Date