

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F06000003184

Entity Name: PRO. AV. SERV. INC.

FILED
Jan 25, 2008
Secretary of State

Current Principal Place of Business:

1835 US 1 SOUTH
SUITE 119-243
SAINT AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

1835 US 1 SOUTH
SUITE 119-243
SAINT AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 11-3679412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENNETT, GUY
1320 TURTLE DUNES COURT
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

BENNETT, LYNNE J
600 WHISPERING CIRCLE
#7
ST AUGUSTINE, FL 32084 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: LYNNE J BENNETT

01/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: TEEGARDIN, ALAN
Address: 711 S. CARSON ST. STE 4
City-St-Zip: CARSON CITY, NV 89701

Title: PST () Delete
Name: TEEGARDIN, ALAN
Address: 711 S. CARSON ST. STE 4
City-St-Zip: CARSON CITY, NV 89701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change () Addition
Name: LAMBERT, BOBBY J
Address: 1285 BARING BLVD #200
City-St-Zip: SPARKS, NV 89434

Title: PST (X) Change () Addition
Name: LAMBERT, BOBBY J
Address: 1285 BARING BLVD #200
City-St-Zip: SPARKS, NV 89434

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: BOBBY J LAMBERT

PST

01/25/2008

Electronic Signature of Signing Officer or Director

Date