## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F99000001860

FILED Nov 14, 2007 Secretary of State

Entity Name: PROFESSIONAL RESOURCES & SERVICES, INC - A GEORGIA CORPORATION

	-	ce of Business:	New Principal Place of Business:
49 WEBE ONCORI	3 ROAD D, NC 28025	5 US	
urrent M	ailing Addr	ess:	New Mailing Address:
49 WEBE ONCORI	8 ROAD D, NC 28025	5 US	
El Number:	65-0862284	FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
lame and	Address of	Current Registered Agent	: Name and Address of New Registered Agent:
OMILA, N 391 PEC			
	E PINES, FL	_ 33026 US	
EMBRON The above	(E PINES, FL		he purpose of changing its registered office or registered agent, or both,
EMBRON The above	(E PINES, FL named entity e of Florida.		he purpose of changing its registered office or registered agent, or both,
EMBROK The above In the State	KE PINES, FL named entity of Florida.		
EMBRON he above h the State	KE PINES, FL named entity of Florida.	y submits this statement for t onic Signature of Registered	
EMBRON he above h the State	named entity e of Florida.  RE: Electro  B AND DIRE P LANGEVIN, S	y submits this statement for to to submits this statement for the conic Signature of Registered sectors:  ( ) Delete SYLVIE ENZIE COURT	Agent Date
PEMBRON The above The State SIGNATUR  PFFICERS title: The ame: The above The	named entity e of Florida.  RE: Electro  S AND DIRE  P LANGEVIN, S 4247 MACKE CONCORD, N	y submits this statement for to to submits this statement for the conic Signature of Registered sectors:  ( ) Delete SYLVIE ENZIE COURT	Agent Date  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  Title: ( ) Change ( ) Addition  Name: Address:

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: SYLVIE LANGEVIN PRES 11/14/2007