

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G79568

FILED
Apr 09, 2008
Secretary of State

Entity Name: PROFESSIONAL HEARING AID CENTERS, INC.

Current Principal Place of Business:

933 LEE RD.
SUITE # 301
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

933 LEE RD.
SUITE # 301
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 59-2348136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARSAD, BEHSHID
933 LEE RD.
SUITE # 301
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

PROFESSIONAL HEARING AID CENTER
933 LEE RD.
SUITE # 301
ORLANDO, FL 32810 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: BEHSHID FARSAD 04/09/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: FARSAD, BEHSHID
Address: 1085 HWY A1A STE 1502
City-St-Zip: SATELLITE BEACH, FL 32937

Title: OFFI () Delete
Name: ELLISWORTH, ROBYN
Address: 1085 HYW A1A STE 1502
City-St-Zip: SATELLITE BEACH, FL 32937

Title: OFFI () Delete
Name: ELLSWORTH, RANDY
Address: 20690 SUGARLOAF MOUNTAIN
City-St-Zip: CLERMONT, FL 32715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BEHSHID FARSAD DIR 04/09/2008

Electronic Signature of Signing Officer or Director Date