

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # J66425

1. Entity Name
PROFESSIONAL SHOPPING SERVICES, INC.



Principal Place of Business
446 LIMERICK DR
MERRITT ISLAND, FL 32953

Mailing Address
PO BOX 540625
MERRITT ISLAND, FL 32954-0625



03312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2801502	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANDMAN, RAYMOND D.
1735 RICHARDSON RD
MERRITT ISLAND, FL 32952

**DO NOT WRITE
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 this is applicable to the above information. NOTE: Registered Agent signature required when replacing.

DATE

FILE NOW!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LANDMAN, RAYMOND D.
STREET ADDRESS	446 LIMERICK DR
CITY-ST-ZIP	MERRITT ISLAND, FL

TITLE	VTS
NAME	LANDMAN, CAROL J
STREET ADDRESS	446 LIMERICK DR
CITY-ST-ZIP	MERRITT ISLAND, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/28/08-80083-014 150.00

12. 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 is true and 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 empowered to 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 an address, with all other like empowered.

SIGNATURE:

Raymond D. Landman
RAYMOND D. LANDMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-28/08

321-452-4285