## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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## **FILED** Mar 30, 2005 8:00 am Secretary of State

DOCUMENT # L23006  1. Entity Name PROFESSIONAL MERCHANDISERS, INC.								03-30-2005	90030 00	)8 ***15	0.00
Principal Place % BRUNDAGI 3230 W KENI TAMPA, FL 3	E Nedy blvd.	., SUITE C	Mailing Address  % BRUNDAGE 3230 W KENNEDY BLVD., SUITE C TAMPA, FL 33609-3007 US				40042195				
2. Principal P	face of Busin	ness	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01102005	Chg-P	CR2E03	4 (10/03)	
City & State			City & State				4. FEI Numb 59-297	•			plied For t Applicable
Zip		Country	Zip	try		5. Certificate	of Status Desired		8.75 Add ee Required		
Name and Address of Current Registered Agent							7. Name and	Address of New R	egistered A	jent – —	
BRUNDAGE, NEIL <del>1867 W MCELROY AVENU</del> E T <del>AMPA, FL 33811 -</del>					Street Ac			er is Not Acceptable		# 2 <u>_</u>	
									FL	Zip Cod	32 (170)
City TAMA  8. The above named entity subprils 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  NEIL BRUNDAGE  Signature:  Signature: Special production of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. The purpose of changing its registered agent, or both, in the State of Florida. I am familiar with a supplication of the purpose of changing its registered agent. The purpose of the purpose of changing its registered agent agent. The purpose of changing its registered agent a											
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be  Trust Fund Contribution.   Added to Fees								·			
10. TILE	Р	OFFICERS AND		11.			ADDITIONS,	CHANGES TO OFF	ICERS AND	DIRECTORS Change	
NAME STREET ADDRESS CITY-ST-ZIP	BRUNDA	CELROY-AVENUE	☐ Delete	NAME STRE		381 TAM	9 W. H	ORA TIO 5. 33609	T. UNC		Addition
TITLE	D		☐ Delete	TITLE	i.	, , , ,				Change	Addition
STREET ADORESS	BRUNDAGE, ANDREA  4867-W MCELROY-AVENUE  ST					381	q w. H	33609	יעט	T#2	
CITY-SI-ZIP TAMPA, Ft. 33811					-ST-ZIP	TA	MA, FL.	33609			
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nne			☐ Delete	TITLE	E					☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP					et address -st-zip						
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 pusting impowered 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 additional statement with a statement w											

NEIL BRUNDAGE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR OR OR OR OR OFFICER OR OR OR OFFICER OR OR OR OFFICER OR OR OR OFFICER O

SIGNATURE: