2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 08:00 AM Secretary of State

ANNUAL REPORT					Apr 10, 2005 00.00 2			
1. Entity Nam	MENT # L84240 / PROFESSIONAL SERVICES.,	INC.			Sec	cretary	of State	
4510 E. TRA	DEWINDS AVE.	Mailing Address 4510 E. TRADEWINDS AVE, FT. LAUDERDALE, FL 33308				#1811 #1811 #1811 #1811	BJB() \$19) 85) JBB¢	
D	O NOT WRITE	IN THIS SPA	CE	01172005 4. FEI Numbi 65-020		CR2E034 (1	,,	
	6. Name and Address of Current Rec	istered Agent		L	4.4			
O'NEAL, RENEE = 4510 E. TRADEWINDS AVE. FT. LAUDERDALE, FL 33308					NOT W THIS SP			
	named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and the state of the sta	·	d Ågent signature required		th, in the State of Flo	rida I am familia	ar with, and accept	
FILE NOW!!! FRE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution				.00 May Be ed to Fees	U00000 04/18/05-	1313436 -80123-01	7 158.75	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DEP PD O'NEAL, GRAFTON 4510 E, TRADEWINDS AVE. FORT LAUDERDALE, FL 33308 STD O'NEAL, RENEE 4510 E, TRADEWINDS AVE. FORT LAUDERDALE, FL 33308	ECTÓRS					·	
VITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			-	DO NOT WRITE IN THIS SPACE				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-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)(1). 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 of the receiver or trustee empowered to execute this report as required by Chapter 807. 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: Graftin O'New

TITLE
NAME
STREET ADDRESS
CITY-SY-ZIP

GRAFTON D'NEAL P.

Daytime Phone #