

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006621

FILED
Sep 29, 2004
Secretary of State

Entity Name: PROFESSIONAL SPEAKERS NETWORK, INC.

Current Principal Place of Business:

9723 NE 2ND AVE
MIAMI SHORES, FL 33138 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 540821
OPA LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 65-0713925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUPREE, MARTHENIA
15211 N.W. 33 COURT
OPA LOCKA, FL 33054

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUPREE, MARTHENIA
Address: 15211 NW 33 COURT
City-St-Zip: OPA LOCKE, FL

Title: VP () Delete
Name: GREEN, W STEVEN
Address: 7715 SW 86 ST A2-405
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: ROSS, TIFFANY
Address: P.O. BOX 540821
City-St-Zip: OPA LOCKA, FL 33054

Title: D () Delete
Name: CLAYTON, BLONDIE
Address: 61 NW 47 ST
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: BRUNT, SAMUEL
Address: 0000000000000
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: SMITH, LOUISE
Address: 3490 CHARLES AVE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GREEN, W STEVEN
Address: 15932 SW 146 TERR
City-St-Zip: MIAMI, FL 33196

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GREIG, MARLON
Address: 285 NW 203 TERR
City-St-Zip: MIAMI, FL 33169

Title: D (X) Change () Addition
Name: TAPPER, JULIA
Address: 6950 SW 26 ST
City-St-Zip: MIRAMAR, FL 33023

Title: T (X) Change () Addition
Name: SMITH, LOUISE
Address: 3490 CHARLES AVE
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHENIA DUPREE

P

09/29/2004

Electronic Signature of Signing Officer or Director

Date