

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000052331

FILED
Mar 29, 2004
Secretary of State

Entity Name: PROFESSIONALS IN MOVING, INC.

Current Principal Place of Business:

12124 NW 23RD MANOR
CORAL SPRINGS, FL 33065

New Principal Place of Business:

11808 NW 32ND CT
CORAL SPRINGS, FL 33065

Current Mailing Address:

12124 NW 23RD MANOR
CORAL SPRINGS, FL 33065

New Mailing Address:

11808 NW 32ND CT.
CORAL SPRINGS, FL 33065

FEI Number: 65-1034827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVIGNE, BERNADETTE M
12124 NW 23RD MANOR
CORAL SPRINGS, FL 33065

Name and Address of New Registered Agent:

LAVIGNE, BERNADETTE M
11808 NW 32ND CT.
CORAL SPRINGS, FL 33065

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: BERNADETTE LAVIGNE

03/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAVIGNE, BERNADETTE M
Address: 12124 NW 23RD MANOR
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD () Delete
Name: LAVIGNE, RAYMOND A
Address: 12124 NW 23RD MANOR
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAVIGNE, BERNADETTE M
Address: 11808 NW 32ND CT
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD (X) Change () Addition
Name: LAVIGNE, RAYMOND A
Address: 11808 NW 32ND CT.
City-St-Zip: CORAL SPRINGS, FL 33065

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNADETTE LAVIGNE

PD

03/29/2004

Electronic Signature of Signing Officer or Director

Date