

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 08:00 A
Secretary of State


DOCUMENT # P01000008622

1. Entity Name
WRIGHT BUSINESS SERVICES COMPANY



Principal Place of Business 8401 SW 19TH ST NORTH LAUDERDALE, FL 33068	Mailing Address 8401 SW 19TH ST NORTH LAUDERDALE, FL 33068
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DO NOT WRITE IN THIS SPACE



01172008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1083494	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

WRIGHT, ROSANNE
 8401 SW 19TH ST
 NORTH LAUDERDALE, FL 33068

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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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

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

000000852725
 03/26/08-80040-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WRIGHT, ROSANNE 8401 SW 19TH ST NORTH LAUDERDALE, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ROSILLO, REBECCA 8401 SW 19TH ST NORTH LAUDERDALE, FL 33068
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Rosanne Wright* *Rosanne Wright* *3/3/08* *954-722-8244*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #