

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000102763

Entity Name: PROFESSIONAL EVALUATION & COUNSELING SERVICES, INC.

FILED  
Jan 26, 2006  
Secretary of State

**Current Principal Place of Business:**

1521 FOREST HILL BLVD  
SUITE #1  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

**Current Mailing Address:**  
1521 FOREST HILL BLVD  
SUITE #1  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

FEI Number: 65-1147649      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEDRAZA, EVELIO JR.  
1521 FOREST HILL BLVD  
SUITE #1  
WEST PALM BEACH, FL 33406 US

**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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PEDRAZA, EVELIO JR.  
Address: 2590 W. CARANDIS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP ( ) Delete  
Name: PRESCITI, FREDERICK  
Address: 10332 15TH CT N  
City-St-Zip: JUPITER, FL 33478

Title: S ( ) Delete  
Name: PEDRAZA, JANETTE  
Address: 2590 W CARANEIS RD  
City-St-Zip: WEST PALM BEACH, FL 33406

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EVELIO PEDRAZA JR

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01/26/2006

Electronic Signature of Signing Officer or Director

Date