## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000010688

Entity Name: PREFERRED ACCOUNTING SERVICES, INC.

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2750 CORAL WAY 6020 SW 40 STREET #202 MIAMI, FL 33155

Current Mailing Address: New Mailing Address:

2750 CORAL WAY 6020 SW 40 STREET #202 MIAMI, FL 33155

FEI Number: 75-3052788 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: 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: 03/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 VP
 ( ) Delete

 Name:
 ABISEID, ROBERT

 Address:
 2750 CORAL WAY #202

City-St-Zip: MIAMI, FL 33145

 Title:
 P
 ( ) Delete

 Name:
 COSTALES, ANA M

 Address:
 5745 SW 39 ST

 City-St-Zip:
 MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition

Name: ABISEID, ROBERT E Address: 6020 SW 40 ST City-St-Zip: MIAMI, FL 33155

Title: VP (X) Change ( ) Addition

 Name:
 COSTALES, ANA M

 Address:
 6020 SW 40 ST

 City-St-Zip:
 MIAMI, FL 33155

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: ROBERT E ABISEID P 03/25/2008