


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000013121 1. Entity Name PARK PLACE MANAGER, INC.	
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Principal Place of Business C/O PROFESSIONAL MANAGEMENT, INC. 9095 SW 87TH AVE., STE. 777 MIAMI, FL 33176	Mailing Address C/O PROFESSIONAL MANAGEMENT, INC. 9095 SW 87TH AVE., STE. 777 MIAMI, FL 33176
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DO NOT WRITE IN THIS SPACE

FILED
08 MAR 13 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03102008 No Chg-P CR2E034 (11/05)

4. FEI Number 42-1575827	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

ORTIZ, SYRIE
C/O PROFESSIONAL MANAGEMENT, INC.
9095 SW 87TH AVE., STE. 777
MIAMI, FL 33176

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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) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P MITCHELL, JAMES R 9095 SW 87TH AVENUE MIAMI, FL 33176
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03/25/08--01050--013 **288.75

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:  James R. Mitchell 3/10/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 305-270-0870