

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000038199

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: NET-PRO PROFESSIONAL NETWORK SOLUTIONS, INC.

## Current Principal Place of Business:

3562 HIMROD RD.  
BOWLING GREEN, FL 33834

## New Principal Place of Business:

3624 HIMROD RD.  
BOWLING GREEN, FL 33834

## Current Mailing Address:

3562 HIMROD RD.  
BOWLING GREEN, FL 33834

## New Mailing Address:

3624 HIMROD RD.  
BOWLING GREEN, FL 33834

FEI Number: 01-0547924

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRYAN, DERREN  
3562 HIMROD RD.  
BOWLING GREEN, FL 33834 US

## Name and Address of New Registered Agent:

BRYAN, DERREN  
3624 HIMROD RD.  
BOWLING GREEN, FL 33834 US

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:

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRYAN, DERREN  
Address: 3562 HIMROD RD.  
City-St-Zip: BOWLING GREEN, FL 33834

Title: VSD ( ) Delete  
Name: BRYAN, DIANE  
Address: 3562 HIMROD RD.  
City-St-Zip: BOWING GREEN, FL 33834

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BRYAN, DERREN  
Address: 3624 HIMROD RD.  
City-St-Zip: BOWLING GREEN, FL 33834

Title: VSD (X) Change ( ) Addition  
Name: BRYAN, DIANE  
Address: 3624 HIMROD RD.  
City-St-Zip: BOWING GREEN, FL 33834

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: DIANE BRYAN

VSD

04/29/2007

Electronic Signature of Signing Officer or Director

Date