

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070126

FILED
May 01, 2009
Secretary of State

Entity Name: PROFESSIONAL CONTRACTORS SERVICES INC.

Current Principal Place of Business:

5600 NW 36TH STREET
110
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

PO BOX 523613
MIAMI, FL 33152

New Mailing Address:

FEI Number: 03-0463464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, MARITZA
5600 NW 36TH ST
STE 110
MIAMI, FL 33166 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRUZ, MARITZA
Address: 5600 NW 36TH ST STE 110
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: VILORIA, VILMA M
Address: 4500 NW 93 DORAL CT
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: ROMERO, THOMAS
Address: 4500 NW 93 DORAL CT
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: RODRIGUEZ, AMASVIDO
Address: 5600 NW 36TH ST STE 110
City-St-Zip: MIAMI, FL 33166

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:

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: MARITZA CRUZ

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date