

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000125489

1. Entity Name  
PROFESSIONAL EMBROIDERY SERVICES, INC



Principal Place of Business

9070 SW 165 CT  
MIAMI, FL 33196

Mailing Address

9070 SW 165 CT  
MIAMI, FL 33196

2. Principal Place of Business

9070 SW 165 PL.

Suite, Apt. #, etc.

3. Mailing Address

9070 SW 165 PL.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33196

Country

USA

Zip

33196

Country

USA

02022005

Chg-P

CR2E034 (10/03)

4. FEI Number

01-0778019

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

8. Name and Address of Current Registered Agent

RUIZ-VELASCO, RUBEN  
9070 SW 165 CT  
MIAMI, FL 33196

7. Name and Address of New Registered Agent

Name RUBEN RUIZ-VELASCO

Street Address (P.O. Box Number is Not Acceptable)

9070 SW 165 PL.

City MIAMI.

FL

Zip Code

33196

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

2-2-05

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME RUIZ VELASCO, RUBEN  
STREET ADDRESS 9070 SW 165TH COURT  
CITY-ST-ZIP MIAMI, FL 33196 ☒ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V.P.  
NAME ELIZABETH RUIZ-VELASCO  
STREET ADDRESS 9070 SW 165 PLACE  
CITY-ST-ZIP MIAMI, FLORIDA 33196 ☐ Change ☒ Addition

TITLE P  
NAME RUBEN RUIZ-VELASCO  
STREET ADDRESS 9070 SW 165 PLACE  
CITY-ST-ZIP MIAMI, FLORIDA 33196 ☐ Change ☒ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-05 786-412 0694

Date

Daytime Phone #