

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000386

FILED  
Sep 06, 2005  
Secretary of State

**Entity Name:** PROFESSIONAL INSTALLATIONS GROUP, INC.

**Current Principal Place of Business:**

17973 SW 29TH LANE  
MIRAMAR, FL 33029 US

**New Principal Place of Business:**

16226 SW 27TH ST  
MIRAMAR, FL 33027 US

**Current Mailing Address:**

PO BOX 297186  
PEMBROKE PINES, FL 33029 US

**New Mailing Address:**

**FEI Number:** 57-1144041      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: D ( ) Delete  
Name: MCMORRIS, SANDRA  
Address: 17973 SW 29TH LANE  
City-St-Zip: MIRAMAR, FL 33029 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MCMORRIS, SANDRA  
Address: 16226 SW 27TH ST  
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP ( ) Change (X) Addition  
Name: MCMORRIS, GLEN E  
Address: 16226 SW 27TH ST  
City-St-Zip: MIRAMAR, FL 33027 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANDRA MCMORRIS

PRES

09/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date