

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000013613

FILED
Sep 16, 2008
Secretary of State**Entity Name:** P R BUSINESS CONSULTING, INC.**Current Principal Place of Business:**41512 ASPEN ST
EUSTIS, FL 32736**New Principal Place of Business:****Current Mailing Address:**41512 ASPEN ST
EUSTIS, FL 32736**New Mailing Address:****FEI Number:** 82-0584664**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GLAZE, RON
41512 ASPEN ST
EUSTIS, FL 32736 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**OFFICERS AND DIRECTORS:****Title:** PD () Delete
Name: GLAZE, PAULA
Address: 41512 ASPEN ST
City-St-Zip: EUSTIS, FL 32736**Title:** VP (X) Delete
Name: GLAZE, RON
Address: 41512 ASPEN ST
City-St-Zip: EUSTIS, FL 32736**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: GLAZE, RON
Address: 41512 ASPEN ST
City-St-Zip: EUSTIS, FL 32736**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: RON GLAZE

PD

09/16/2008

Electronic Signature of Signing Officer or Director_____
Date