

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027896

Entity Name: PSMA, INC.

FILED
Feb 08, 2005
Secretary of State

Current Principal Place of Business:

6748 BUENA VISTA DRIVE
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

6748 BUENA VISTA DRIVE
MARGATE, FL 33063

New Mailing Address:

FEI Number: 16-1656589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANICCTO, PAULO S
6748 BUENA VISTA DRIVE
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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: BRENO GOMES

02/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANICCTO, PAULO
Address: 6748 BUENA VISTA DRIVE
City-St-Zip: MARGATE, FL 33063

Title: DP () Delete
Name: ANICCTO, FABIANA B
Address: 6748 BUENA VISTA DRIVE
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ANICETO, PAULO S
Address: 6748 BUENA VISTA DRIVE
City-St-Zip: MARGATE, FL 33063

Title: DP (X) Change () Addition
Name: ANICETO, FABIANA B
Address: 6748 BUENA VISTA DRIVE
City-St-Zip: MARGATE, FL 33063

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: PAULO S ANICETO

DP

02/08/2005

Electronic Signature of Signing Officer or Director

Date