

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000093597

FILED
Apr 01, 2008
Secretary of State

Entity Name: PROCESSING NETWORKS, INC.

Current Principal Place of Business:

3105 W WATERS AVE STE 208
TAMPA, FL 33614

New Principal Place of Business:

4414 HAVELOCKE DR
LAND O LAKES, FL 34638

Current Mailing Address:

3105 W WATERS AVE STE 208
TAMPA, FL 33614

New Mailing Address:

4414 HAVELOCKE DR
LAND O LAKES, FL 34638

FEI Number: 61-1456971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACIAS, OSVALDO
3105 W WATERS AVE STE 208
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

SOLER, ARLETTE
4414 HAVELOCKE DR
LAND O LAKES, FL 34638 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: ARLETTE SOLER

04/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOLER, ARLETTE
Address: 3105 W WATERS AVE
City-St-Zip: TAMPA, FL 33614

Title: D (X) Delete
Name: MACIAS, OSVALDO
Address: 3105 W WATERS AVE
City-St-Zip: ODESSA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SOLER, ARLETTE
Address: 4414 HAVELOCKE DR
City-St-Zip: LAND O LAKES, FL 34638

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: ARLETTE SOLER

D

04/01/2008

Electronic Signature of Signing Officer or Director

Date