

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000102446

1. Entity Name
PREMIER ENTERPRISE SERVICES, INC



Principal Place of Business
196 HOLLYWOOD BLVD
MELBOURNE, FL 32904

Mailing Address
P.O. BOX 100825
PALM BAY, FL 32910



04222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3727185	Applied For
	Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> 4	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RASKETT, DEBORAH
1640 WICHITA BLVD SE
PALM BAY, FL 32909

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

U000000729994
05/08/07-80061-002 158.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RASKETT, DEBORAH
STREET ADDRESS	1640 WICHITA BLVD SE
CITY-ST-ZIP	PALM BAY, FL 32909

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
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TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Deborah Raskett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-07
Date

321-728-1245
Daytime Phone #