2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129178

Entity Name: POWER IN SERVICES, INC.

FILED Jun 20, 2<u>00</u>5 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8357 N. MISSION WOOD CIRCLE 6115 MIRAMAR PKWY MIRAMAR, FL 33025 SUITE J

MIRAMAR, FL 33023

Current Mailing Address: New Mailing Address:

2450 SW 87 TERRACE 8357 N. MISSION WOOD CIRCLE MIRAMAR, FL 33025 MIRAMAR, FL 33025

FEI Number: 20-0377195 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MONCUR, ANNAMAE MONCUR, PATRICK K 2450 SW 87 TERRACE 8357 N. MISSION WOOD CIRCLE MIRAMAR, FL 33025 MIRAMAR, FL 33025 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: PATRICK K MONCUR 06/20/2005

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MONCUR, ANNAMAE MONCUR, PATRICK K Name: Name: 8357 N. MISSION WOOD CIRCLE 2450 SW 87 TERRACE Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIRAMAR, FL 33025

Title: Title: (X) Change () Addition () Delete

Name: MONCUR, JAMAINE Name: MONCUR, JAMAINE 8357 N. MISSION WOOD CIRCLE 2450 SW 87 TERRACE Address: Address: MIRAMAR, FL 33025 MIRAMAR, FL 33025 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

MONCUR, PATRICK Name: MONCUR, ANNAMAE R Name: 8357 N. MISSION WOOD CIRCLE Address: 2450 SW 87 TERRACE Address City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIRAMAR, FL 33025

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: PATRICK K MONCUR 0 06/20/2005