2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147681

Entity Name: A JESUS PROFESSIONAL SERVICES, CORP.

FILED Feb 26, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|
| | |

1811 SE WALTON LAKES DR, SUITE 809 2167 SE EATONVLILLE DR PORT ST. LUCIE, FL 34952 US PORT ST. LUCIE, FL 34952 US

Current Mailing Address: New Mailing Address:

1811 SE WALTON LAKES DR, SUITE 809 2167 SE EATONVILLE DR PORT ST. LUCIE, FL 34952 US PORT ST. LUCIE, FL 34952 US

FEI Number: 20-0463486 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DE JESUS, ARLEY

1811 SE WALTON LAKES DR, SUITE 809

PORT ST. LUCIE, FL 34952 US

DE JESUS, ARLEY

2167 SE EATONVILLE DR

PORT ST. LUCIE, FL 34952 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: ARLEY DE JESUS 02/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: DE JESUS, ARLEY Name: DE JESUS, ARLEY

Address: 1811 SE WALTON LAKES DR, SUITE 809 Address: 2167 SE EATONVILLE DR
City-St-Zip: PORT ST. LUCIE, FL 34952 US City-St-Zip: PORT ST. LUCIE, FL 34952 US

() Delete Title: (X) Change () Addition Title: Name: MARTINS, MARCELO P Name: AQUINO, EUDES A 1832 SE BERKSHIRE BLVD 1785 SW CONFORT ST Address: Address: PORT ST LUCIE, FL 34952 US PORT ST LUCIE, FL 34987 US City-St-Zip: City-St-Zip:

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

Name:MORALES, RONALDOName:CHAJON, ANTONIO DAddress:801 KING ORANGE DRAddress:713 EL RANCHO DRCity-St-Zip:FORT PIERCE, FL 34982 USCity-St-Zip:FORT PIERCE, FL 34982 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ARLEY DE JESUS PD 02/26/2007