2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082506

ST. CLOUD, FL 34772

City-St-Zip:

Entity Name: PREFERRED COMPLIANCE SOLUTIONS, INC.

FILED Feb 13, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2013 LIVE OAK BLVD. STE. K ST. CLOUD, FL 34771 **New Mailing Address: Current Mailing Address:** 2013 LIVE OAK BLVD. STE. K ST. CLOUD, FL 34771 FEI Number: 20-1160796 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: APONTE, JOSE L 5650 OLD QUEENS CT ST. CLOUD, FL 34772 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition APONTE, JOSE L Name: Name: 5650 OLDE QUEENS COURT Address: Address: City-St-Zip: ST. CLOUD, FL 34772 City-St-Zip: () Delete Title: VΡ Title: (X) Change () Addition Name: APONTE, JACQUELINE VP Name: APONTE, JACQUELINE 5650 OLDE QUEENS COURT Address: 5650 OLDE QUEENS COURT Address:

ST. CLOUD, FL 34772

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: JOSE APONTE PRES 02/13/2008