2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082506

Entity Name: PREFERRED COMPLIANCE SOLUTIONS, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2013 LIVE STE. K	OAK BLVD.		1320 STE	LOUISIANA AVEN	NUE	
	D, FL 34771			CLOUD, FL 34769)	
Current Mailing Address:				New Mailing Address:		
STE. K	OAK BLVD. D, FL 34771		STE) LOUISIANA AVEN . B CLOUD, FL 34769		
FEI Number:	: 20-1160796	FEI Number Applied For ()	FEI Number N	ot Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ST. CLOU	QUEENS CT D, FL 34772	US				
	e named entity : e of Florida.	submits this statement for tr	e purpose of char	iging its registered	l office or registered agent, or both,	
SIGNATU	RE:					
Electronic Signature of Registered Agent					Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () APONTE, JOSE 5650 OLDE QU ST. CLOUD, FL	JEENS COURT	Title: Name Addre City-S	: ess:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X APONTE, JACO 5650 OLDE QU ST. CLOUD, FL	JEENS COURT	Title: Name Addre City-S	: ess:	() Change () Addition	

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 01/20/2009