

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089931

FILED
Apr 24, 2007
Secretary of State

Entity Name: PROFESSIONAL MESSENGER SERVICES, INC.

Current Principal Place of Business:

2525 EMBASSY DR., SUITE 2
COOPER CITY, FL 33026

New Principal Place of Business:

Current Mailing Address:

2525 EMBASSY DR., SUITE 2
COOPER CITY, FL 33026

New Mailing Address:

FEI Number: 90-0201157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY-SUAREZ, CANDICE
10120 SW 49TH PLACE
COOPER CITY, FL 33328 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SUAREZ, PETE M
Address: 10120 SW 49TH PLACE
City-St-Zip: COOPER CITY, FL 33328

Title: V () Delete
Name: MURPHY-SUAREZ, CANDICE
Address: 10120 SW 49 PL
City-St-Zip: COOPER CITY, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MURPHY-SUAREZ, CANDICE
Address: 10120 SW 49 PL
City-St-Zip: COOPER CITY, FL 33328

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: CANDICE MURPHY-SUAREZ

VP

04/24/2007

Electronic Signature of Signing Officer or Director

Date