2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000090358

Entity Name: PROTCS, INC.

FILED May 01, 2007 Secretary of State

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

8512 SUBURBAN DR. 6445 S. CHICKASAW TRAIL ORLANDO, FL 32829 US

SUITE 288

ORLANDO, FL 32829

Current Mailing Address: New Mailing Address:

6445 S. CHICKASAW TRAIL 8512 SUBURBAN DR. SUITE 288 ORLANDO, FL 32829 US

ORLANDO, FL 32829 US

FEI Number: 20-1231380 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:

PAVLIK, DAVID D PAVLIK, DAVID D 8512 SÚBURBAN DR 6445 S. CHICKASAW TRAIL US SUITE 288 ORLANDO, FL 32829 ORLANDO, FL 32829 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: DAVID D PAVLIK 05/01/2007

> 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:

Title: CFO () Delete PAGE, WILLIAM R Name:

6000 EXECUTIVE CENTER DRIVE Address:

City-St-Zip: BOCA RATON, FL 33431 US

Title: PRES (X) Delete Name: PAVLIK, DAVID D 8512 SUBURBAN DR Address: ORLANDO, FL 32829 US

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition Name: PAVLIK, DAVID D

Address:

6445 S. CHICKASAW TRAIL, SUITE 288

City-St-Zip: ORLANDO, FL 32829 US

Title: () Change () Addition

Name: Address: 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: DAVID D PAVLIK CP 05/01/2007