

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141514

FILED
May 19, 2005
Secretary of State

Entity Name: PROVIDER GENERAL SERVICES, INC.

Current Principal Place of Business:

9826 BERNWOOD PLACE DR 101
FT MYERS, FL 33912

New Principal Place of Business:

3504 EDSON AVENUE
FT MYERS, FL 33916

Current Mailing Address:

9826 BERNWOOD PLACE DR 101
FT MYERS, FL 33912

New Mailing Address:

3504 EDSON AVENUE
FT MYERS, FL 33916

FEI Number: 20-1738207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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

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: PD () Delete
Name: DE MAGALHAES, CESAR A
Address: 9826 BERNWOOD PLACE DR 101
City-St-Zip: FT MYERS, FL 33912

Title: TD (X) Delete
Name: LIMA, AMARILDO P
Address: 9826 BERNWOOD PLACE DR 213
City-St-Zip: FT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DE MAGALHAES, CESAR A
Address: 3504 EDSON AVENUE
City-St-Zip: FT MYERS, FL 33916

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CESAR A DE MAGALHAES

PD

05/19/2005

Electronic Signature of Signing Officer or Director

Date