

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000028635

FILED
Apr 30, 2007
Secretary of State

Entity Name: PROFESSIONAL RECOVERY SOLUTIONS, INC.

Current Principal Place of Business:

4927 SOUTHFORK DR
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

4927 SOUTHFORK DR
LAKELAND, FL 33813

New Mailing Address:

POST OFFICE BOX 5057
LAKELAND, FL 33807

FEI Number: 20-2390691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUELOW, JASON
4927 SOUTHFORK DR
LAKELAND, FL 33813 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: BUELOW, JASON
Address: 4927 SOUTHFORK DR
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JASON M BUELOW

PD

04/30/2007

Electronic Signature of Signing Officer or Director

Date