

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90033 020 ***158.75

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1. Entity Name

PROCOM SERVICES, INC.



Principal Place of Business

1228 SANDSTONE RUN
SANFORD FL 32771

Mailing Address

7025 CR 46A
SUITE: 1071, # 357
LAKE MARY FL 32746



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number 01-0836718

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REYES, ELIGIO R JR.
7025 CR 46A
SUITE: 1071, # 357
LAKE MARY FL 32746

Name ELIGIO R. REYES, JR.

Street Address (P.O. Box Number is Not Acceptable)

1228 Sandstone Run

City Sanford

FL

Zip Code 32771

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature of registered agent or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

ELIGIO R. REYES, JR President & G.M. 02-25-08

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P&GM
NAME REYES, ELIGIO R JR.
STREET ADDRESS 1228 SANDSTONE RUN
CITY-ST-ZIP Sanford, FL 32771

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #