2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157718

City-St-Zip:

PEMBROKE PINES, FL 33029

Entity Name: P.S.A. ENTERPRIZE INC.

FILED Mar 21, 2007 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|--|--------------------------------|---|---|--|
| | 184 TERRACE KE PINES, FL | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | 184 TERRACE KE PINES, FL | | | | |
| FEI Number | : 20-3867624 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| | MARIA 184 TERRACE KE PINES, FL | | | | |
| The above in the State | e named entity s e of Florida. | submits this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electron | ic Signature of Registered A | gent | Date | |
| Election Ca | mpaign Financing | Trust Fund Contribution (). | | | |
| OFFICER | S AND DIREC | TORS: | ADDITIONS/CHANGE | S TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () ARECES, MARI 2467 NW 184 T PEMBROKE PII | ERRACE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () SIMPKIN, SAM 14931 SW 38 S PEMBROKE PII | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | ST () PIERRE, JAY | Delete | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: MARIA ARECES P 03/21/2007