## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000011342

Entity Name: PRO SPECIAL SERVICES, INC.

**FILED** Feb 06, 2007 Secretary of State

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

5391 ELM CT 6115 METROWST BLVD ORLANDO, FL 32811

**ÜNIT 105** ORLANDO, FL 32835

**Current Mailing Address: New Mailing Address:** 

6115 METROWEST BLVD 5391 ELM CT ORLANDO, FL 32811 **UNIT 105** 

ORLANDO, FL 32835

FEI Number: 20-4185281 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:

NEVES BARROS, MARIA S BARROS, MARIA SANDRA N 5391 ELM CT 6115 METROWEST BLVD ORLANDO, FL 32811 US **UNIT 105** 

ORLANDO, FL 32835 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: MARIA SANDRA N BARROS 02/06/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition N BARROS, MARIA S BARROS, MARIA SANDRA N Name: Name: 5391 ELM CT 6115 METROWEST BLVD Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32835

Title: Title: (X) Change ( ) Addition () Delete VASCONCELOS, JOSE R JR Name: Name: VASCONCELOS, JOSE R JR

5391 ELM CT Address: 6115 METROWEST BLVD UNIT 105 Address:

ORLANDO, FL 32811 ORLANDO, FL 32835 City-St-Zip: City-St-Zip:

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.

SIGNATURE: MARIA SANDRA N BARROS PD 02/06/2007