2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2007
Secretary of State

DOCUMENT# P06000079638

Entity Name: CRUZ PROFESSIONAL SERVICES, CORP.

Current Principal Place of Business:

2340 W JACKSON ST
SEBRING, FL 33870 US

New Principal Place of Business:

4133 COMMERCIAL DR
SEBRING, FL 33870 US

Current Mailing Address:

2340 W JACKSON ST
SEBRING, FL 33870 US

New Mailing Address:

4133 COMMERCIAL DR
SEBRING, FL 33870 US

FEI Number: 20-5100026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRUZ, ADRIANO P
2340 W JACKSON ST
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

CRUZ, ADRIANO P
4133 COMMERCIAL DR
SEBRING, FL 33870 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: ADRIANO P CRUZ 07/13/2007
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: P ( ) Delete
Name: CRUZ, ADRIANO P
Address: 2340 W JACKSON ST
City-St-Zip: SEBRING, FL 33870 US

Title: PD ( ) Delete
Name: CRUZ, ANTONIO P
Address: 2340 W JACKSON ST
City-St-Zip: SEBRING, FL 33870 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CRUZ, ADRIANO P
Address: 4133 COMMERCIAL DR
City-St-Zip: SEBRING, FL 33870 US

Title: PD (X) Change ( ) Addition
Name: CRUZ, ANTONIO P
Address: 4133 COMMERCIAL DR
City-St-Zip: SEBRING, FL 33870 US

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: ADRIANO P CRUZ PD 07/13/2007
Electronic Signature of Signing Officer or Director Date