

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000148430

FILED  
Mar 06, 2007  
Secretary of State

Entity Name: EXPERT MANAGEMENT SERVICES, INC.

## Current Principal Place of Business:

3155 SW 10TH STREET  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

## Current Mailing Address:

3155 SW 10TH STREET  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

FEI Number: 68-0644257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

## Name and Address of New Registered Agent:

COHEN, GLENN  
3155 SW 10TH STREET  
SUITE A  
DEERFIELD BEACH, FL 33442 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: GLENN COHEN

03/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete  
Name: JOHNSON, ED  
Address: 3155 SW 10TH STREET  
City-St-Zip: DEERFIELD BEACH, FL 33442

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition  
Name: COHEN, GLENN  
Address: 3155 SW 10TH STREET  
City-St-Zip: DEERFIELD BEACH, FL 33442

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: GLENN COHEN

MR

03/06/2007

Electronic Signature of Signing Officer or Director

Date