

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-12-2008 90036 033 ***150.00

DOCUMENT # P07000060817	
1. Entity Name SCHROEDER PROFESSIONAL SERVICES INC.	

Principal Place of Business 8644 NW 29TH DRIVE CORAL SPRINGS, FL 33065	Mailing Address 8644 NW 29TH DRIVE CORAL SPRINGS, FL 33065
--	--

2. Principal Place of Business - No P.O. Box # 8120 NW 51 Street	3. Mailing Address 8120 NW 51 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Lauderhill FL	City & State Lauderhill FL
--------------------------------------	--------------------------------------

Zip 33351	Country USA	Zip 33351	Country USA
---------------------	-----------------------	---------------------	-----------------------



03262008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent SIMPSON, DIANE 8644 NW 29TH DRIVE CORAL SPRINGS, FL 33065		7. Name and Address of New Registered Agent Name Andrea L. Schroeder Street Address (P.O. Box Number is Not Acceptable) 8120 NW 51 Street City Lauderhill FL Zip Code 33351	
---	--	--	--

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 Andrea L. Schroeder Signature, typed or printed name of registered agent and title if applicable.		Andrea L. Schroeder President (NOTE: Registered Agent signature required when reinstating)		3/27/08 DATE	
--	--	--	--	------------------------	--

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	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 NAME STREET ADDRESS CITY - ST - ZIP	P/D SCHROEDER, ANDREA L 8120 NW 51ST STREET LAUDERHILL, FL 33351 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SCHROEDER, ANDREA L 8120 NW 51ST STREET LAUDERHILL, FL 33351 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP/D SCHROEDER, RICHARD F 8120 NW 51ST STREET LAUDERHILL, FL 33351 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SCHROEDER, RICHARD F 8120 NW 51ST STREET LAUDERHILL, FL 33351 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Andrea L. Schroeder SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Andrea L. Schroeder President 3/27/08 Date 954-240-3211 Daytime Phone #

2008 FOR PROFIT CORPORATION ANNUAL REPORT

3/12/2008-90036-033-\$150.00-\$150.00

DOCUMENT # P07000060817 1. Entry Name SCHROEDER PROFESSIONAL SERVICES INC.				ATTACHMENT	
Principal Place of Business 8644 NW 29TH DRIVE CORAL SPRINGS, FL 33065		Mailing Address 8644 NW 29TH DRIVE CORAL SPRINGS, FL 33065		66005523	
2. Principal Place of Business - No P.O. Box # 8120 NW 51 Street		3. Mailing Address 8120 NW 51 Street			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Lauderhill FL		City & State Lauderhill FL		4. FEI Number 26-0193751	
Zip 33351		Country 		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SIMPSON, DIANE 8644 NW 29TH DRIVE CORAL SPRINGS, FL 33065				7. Name and Address of New Registered Agent Name Andrea L. Schroeder Street Address (P.O. Box Number is Not Acceptable) 8120 NW 51 Street City Lauderhill FL Zip Code 33351	
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 <u>Andrea L. Schroeder</u> Andrea L. Schroeder President 3/3/2008 (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		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 NAME STREET ADDRESS CITY - ST - ZIP	P/D SCHROEDER, ANDREA L 8120 NW 51ST STREET LAUDERHILL, FL 33351	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SCHROEDER, ANDREA L 8120 NW 51ST STREET LAUDERHILL, FL 33351	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP/D SCHROEDER, RICHARD F 8120 NW 51ST STREET LAUDERHILL, FL 33351	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SCHROEDER, RICHARD F 8120 NW 51ST STREET LAUDERHILL, FL 33351	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Andrea L. Schroeder</u> Andrea L. Schroeder President 2/11/08 X 954-240-3211 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		