

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000058034

FILED  
Mar 01, 2010  
Secretary of State

**Entity Name:** PRO MANAGEMENT SERVICES PLUS, INC.

**Current Principal Place of Business:**

5026 W ATLANTIC AVE  
21  
DELRAY BEACH, FL 33484 US

**New Principal Place of Business:**

341 CITY VIEW DR.  
FORT LAUDERDALE, FL 33311 US

**Current Mailing Address:**

5026 W ATLANTIC AVE  
21  
DELRAY BEACH, FL 33484 US

**New Mailing Address:**

341 CITY VIEW DR.  
FORT LAUDERDALE, FL 33311 US

**FEI Number:** 26-2807959

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
SUITE 500  
ORLANDO, FL 32804 US

**Name and Address of New Registered Agent:**

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:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PVD  
**Name:** RAMPULLA, JOSEPH  
**Address:** 341 CITY VIEW DR  
**City-St-Zip:** FORT LAUDERDALE, FL 33311 US

**Title:** ST  
**Name:** RAMPULLA, ARLENE  
**Address:** 341 CITY VIEW DR  
**City-St-Zip:** FORT LAUDERDALE, FL 33311 US

I hereby 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 all other like empowered.

**SIGNATURE:** JOSPEH RAMPULLA

PVD

03/01/2010

Electronic Signature of Signing Officer or Director

Date