

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000086352

FILED
Jan 30, 2009
Secretary of State

Entity Name: PRO SERVICES PROPERTY MANAGEMENT INC

Current Principal Place of Business:

PO BOX 5944
CORAL RIDGE DRIVE #137
CORAL SPRINGS, FL 33076

New Principal Place of Business:

3801 S OCEAN DRIVE
APT 8T-N
HOLLYWOOD, FL 33019

Current Mailing Address:

PO BOX 5944
CORAL RIDGE DRIVE #137
CORAL SPRINGS, FL 33076

New Mailing Address:

3801 S OCEAN DRIVE
APT 8T-N
HOLLYWOOD, FL 33019

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MANCE, FREDERIC
10128 MARLIN DRIVE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

JAMES, HARVARD
3801 S OCEAN DRIVE
APT 8T-N
HOLLYWOOD, FL 33019 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: HARVARD JAMES

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JAMES, HARVARD
Address: PO BOX 5944 - CORAL RIDGE DR. #137
City-St-Zip: CORAL SPRINGS, FL 33076

Title: P () Delete
Name: MANCE, FREDERIC
Address: 10128 MARLIN DRIVE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JAMES, HARVARD
Address: 3801 S OCEAN DRIVE APT 8T-N
City-St-Zip: HOLLYWOOD, FL 33019

Title: P (X) Change () Addition
Name: MARTIN, GEORGE
Address: 20487 VIA MARISA
City-St-Zip: BOCA RATON, FL 33498

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: HARVARD JAMES

D

01/30/2009

Electronic Signature of Signing Officer or Director

Date