2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# P08000093494

Entity Name: PROFESSIONAL ALLIANCE COMMERCIAL ENTERPRISES, INC.

Current Principal Place of Business:

5005 STERLING WAY
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

5005 STERLING WAY
PACE, FL 32571

New Mailing Address:

FEI Number: 26-3495796 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PILONE, PAUL
4795 CERNY ROAD
PENSACOLA, FL 32526 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: D ( ) Delete
Name: PILONE, PAUL
Address: 4795 CERNY ROAD
City-St-Zip: PENSACOLA, FL 32526

Title: D ( ) Delete
Name: TORINO, JOHN
Address: 5826 ADMIRALS ROAD
City-St-Zip: MILTON, FL 32583

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: CASH, MAGGI
Address: 9174 SUNSET DR.
City-St-Zip: NAVARRE, FL 32566

Title: ATTN ( ) Change (X) Addition
Name: SMITH, RON
Address: 5005 STERLING WAY
City-St-Zip: PACE, FL 32571

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: PAUL PILONE PRES 02/27/2009

Electronic Signature of Signing Officer or Director Date