

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057760

FILED
Apr 16, 2009
Secretary of State

Entity Name: PROFESSIONAL AGENT'S RESOURCE, INC.

Current Principal Place of Business:

8603 S. DIXIE HWY
#201
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

8603 S. DIXIE HWY
#201
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0509670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASOW, ANDREW
140 SW 23RD RD
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

KASOW, ANDREW
420 SW 28TH RD.
MIAMI, FL 33129 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KASOW, ANDREW M
Address: 8603 S DIXIE HWY #201
City-St-Zip: MIAMI, FL 33143

Title: ST () Delete
Name: SCHUETTE, SANDRA
Address: 8603 S DIXIE HWY, # 201
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SANDRA SCHUETTE

ST

04/16/2009

Electronic Signature of Signing Officer or Director

Date