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FILED

Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT #

1. Corporation Name

Professional Training Systems Inc.

Principal Place of Business

72 Royal Oak Court
Vero Beach, Florida

Mailing Address

72 Royal Oak Court
Vero Beach, Florida

2. Principal Place of Business

21 72 Royal Oak Court

Suite, Apt. #, etc.

22 APT # 207

City & State

23 Vero Beach, Florida

Zip

24 32962

Country

25 U.S.A.

2a. Mailing Address

26 72 Royal Oak Court

Suite, Apt. #, etc.

27 APT # 207

City & State

28 Vero Beach, Florida

Zip

29 32962

Country

30 U.S.A.

3. Date Incorporated or Qualified

4/12/95

3a. Date of Last Report

4. FEI Number

59-3318977

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

Francis M. Connolly
72 Royal Oak Court
APT # 207
Vero Beach, Florida 32962

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and, if applicable, the corporation's registered agent's signature required when reappointing

Signature typed or printed name of registered agent and, if applicable, the corporation's registered agent's signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE P/s/d ☐ DELETE

NAME Francis M. Connolly

STREET ADDRESS 72 Royal Oak Court, APT 207

CITY-ST-ZIP Vero Beach, Florida 32962

TITLE V/T/D ☐ DELETE

NAME Margaret Connolly

STREET ADDRESS 72 Royal Oak Court, APT 207

CITY-ST-ZIP Vero Beach, Florida 32962

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, and that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature typed or printed name of signing officer or director

DATE

Signature typed or printed name of signing officer or director

CR2E034 (9/96)