

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000049360

FILED
Jun 30, 2005
Secretary of State

Entity Name: PC TRAINING INSTITUTE INC.

Current Principal Place of Business:

4455 MEDICAL CENTER WAY
SUITE 102
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

4455 MEDICAL CENTER WAY
SUITE 102
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 65-0594251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, STEVEN
4357 ONEGA CIRCLE
WEST PALM BEACH, FL 33409 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HATCH, STEVEN D
Address: 4357 ONEGA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S () Delete
Name: DON, MCCAIN
Address: 901 MICK RD
City-St-Zip: MOUNT VERNON, IL 62864

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: HATCH, SHAUNA M VP
Address: 4357 ONEGA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN HATCH

PRES

06/30/2005

Electronic Signature of Signing Officer or Director

Date