2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000051915

Entity Name: PREMIER LIQUIDATION SERVICES, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
2217 ARBOR WALK CIRCLE UNIT 828 NAPLES, FL 33942	4188 TAMIAMI TRAIL N NAPLES, FL 34103

Current Mailing Address:	**New Mailing Address:**
2217 ARBOR WALK CIRCLE UNIT 828 NAPLES, FL 33942	P O BOX 1071 NAPLES, FL 34106

FEI Number: 65-0675125   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WOLLMAN, EDWARD E ESQ 5100 NORTH TAMIAMI TRAIL SUITE 131 NAPLES, FL 33940 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: _____

        Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P ( ) Delete
Name:	MURPHY, WAYNE
Address:	PO BOX 1071 N/A
City-St-Zip:	NAPLES, FL 34106 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P (X) Change ( ) Addition
Name:	MURPHY, WAYNE S
Address:	1343 SOLANA ROAD
City-St-Zip:	NAPLES, FL 34103 US

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: WAYNE S MURPHY   PRES   04/18/2005

        Electronic Signature of Signing Officer or Director   Date