


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000013628

1. Entity Name
PERSONAL COMPUTER SOLUTIONS, INC.



Principal Place of Business
**8767 PLANTATION RIDGE BLVD.
 LAKELAND, FL 33809**

Mailing Address
**8767 PLANTATION RIDGE BLVD.
 LAKELAND, FL 33809**

DO NOT WRITE IN THIS SPACE



04062005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3431925 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**GERSTLER, DOUGLAS A
 8767 PLANTATION RIDGE BLVD.
 LAKELAND, FL 33809**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT GERSTLER, DOUGLAS A 8767 PLANTATION RIDGE BLVD. LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS GERSTLER, DEBRA A 8767 PLANTATION RIDGE BLVD LAKELAND, FL 33809
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Douglas A. Gerstler **Douglas A. GERSTLER** 4-23-05 (863)859-0630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #