

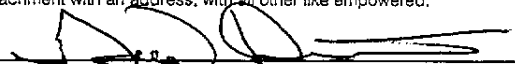


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000016669		
1. Entity Name PROFESSIONAL ACCOUNTING SPECIALISTS INC.		
Principal Place of Business 928 S.E. 13TH PLACE CAPE CORAL, FL 33990		Mailing Address 928 S.E. 13TH PLACE CAPE CORAL, FL 33990
DO NOT WRITE IN THIS SPACE		
		
4. FEI Number 65-0736466		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent DURANTE, GAIL 928 S.E. 13TH PLACE CAPE CORAL, FL 33990		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DURANTE, JOSEPH 1225 S.W. 36TH TERRACE CAPE CORAL, FL 33914	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DURANTE, GAIL 1225 S.W. 36TH TERRACE CAPE CORAL, FL 33914	
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DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		4/22/04 (239) 458-5557 Date Daytime Phone #