2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000082772

Entity Name: PRO%CENT, INC.

FILED Mar 20, 2007 Secretary of State

Current P	rincipal Place of	Business:	New Principal Place	of Business:
	TWIND CT D, FL 32812			
Current Mailing Address:		New Mailing Address:		
1647 JAG APOPKA,	UAR CIR FL 32712			
FEI Number	: 59-3471163 F	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Curi	ent Registered Agent:	Name and Address o	f New Registered Agent:
3885 SHA ORLAND(, RONALD J SR DER ROAD D, FL 32808 US	3		
		mits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
in the Stat	e of Florida.	mits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
	e of Florida.	mits this statement for the positions of Registered Agr		d office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida. RE: Electronic \$	·		
in the Stat SIGNATU Election Ca	e of Florida. RE: Electronic \$	Signature of Registered Agoust Fund Contribution ().	ent	
in the Stat SIGNATU Election Ca	e of Florida. RE: Electronic S mpaign Financing Tri	Signature of Registered Agoust Fund Contribution (). RS: ete J SR T	ent	Date
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electronic S mpaign Financing Tru S AND DIRECTO P () Del HUDSON, RONALD 4956 EASTWIND C	Signature of Registered Agr ust Fund Contribution (). RS: ete J SR T 12	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KELLY A KRONE VP 03/20/2007