2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000099794

FILED Sep 15, 2009 Secretary of State

Entity Nar	ne: PREMIUN	ASSET RECOVERY CORPO	ORATION		
Current Principal Place of Business:			New Principal Place o	of Business:	
SUITE 210	DRAN BLVD D BEACH, FL	33442 US			
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
P.O BOX 2 WARREN,	036 MI 480902036	3 US			
FEI Number:	65-0813057	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	New Registered Agent:	
C/O C T CO 1200 SOU	ORATION SYS ORPORATION TH PINE ISLAI ON, FL 33324	I SYSTEM ND ROAD	2840 S. FALKENBURG	BORNMAN, YOLANDA 2840 S. FALKENBURG ROAD RIVERVIEW, FL 33569 US	
The above in the State	named entity s of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: YOLANDA BORNMAN				09/15/2009	
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TREA () REDMAN, MAR 28405 VAN DYP WARREN, MI 4	(E AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PRES () NEEDS, RION E 28405 VAN DYR WARREN, MI 4	(E AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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: MARK A. REDMAN **TREA** 09/15/2009