

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000058616

FILED  
Jul 06, 2005  
Secretary of State

Entity Name: PORTFOLIO PREMIUM SERVICES, INC.

## Current Principal Place of Business:

5145 CURRY FORD RD  
ORLANDO, FL 32812 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 570603  
ORLANDO, FL 32857 US

## New Mailing Address:

FEI Number: 59-3520420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BESSIRE, ANN M  
5145 CURRY FORD ROAD  
ORLANDO, FL 32812 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BESSIRE, ANN M  
Address: 1955 COTSWOLD DR.  
City-St-Zip: ORLANDO, FL 32825

Title: VS ( ) Delete  
Name: SIKES, FERNANDO  
Address: 3339 STONEWOOD COURT  
City-St-Zip: ORLANDO, FL 32806

Title: T ( ) Delete  
Name: FIGUERAS, LIZETTE  
Address: 9525 SW 94TH CT.  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANN MARIE BESSIRE

PRES

07/06/2005

Electronic Signature of Signing Officer or Director

Date