

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000077028

**FILED**  
**Aug 30, 2007**  
**Secretary of State**

**Entity Name:** PROFESSIONAL BUSINESS SOLUTIONS, INC.

**Current Principal Place of Business:**

110 E ATLANTIC AVE  
235  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

**Current Mailing Address:**

110 E ATLANTIC AVE  
235  
DELRAY BEACH, FL 33444

**New Mailing Address:**

**FEI Number:** 65-0861664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANSTIS, JEFFREY  
110 E ATLANTIC AVE  
SUITE 235  
DELRAY BEACH, FL 33444 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

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ANSTIS, JEFFREY  
Address: 110 E. ATLANTIC AVE #235  
City-St-Zip: DELRAY BEACH, FL 33444

Title: DVP ( ) Delete  
Name: LUPARDO, CONCETTA  
Address: 110 E. ATLANTIC AVE #235  
City-St-Zip: DELRAY BEACH, FL 33444

Title: DVP (X) Delete  
Name: BENSON, FRANKLIN  
Address: 110 E. ATLANTIC AVE #235  
City-St-Zip: DELRAY BEACH, FL 33444

**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 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: JEFFREY ANSTIS

P

08/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date