

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042286

FILED
Apr 13, 2004
Secretary of State

Entity Name: PROFESSIONAL REVIEW SERVICES/PRS, INC.

Current Principal Place of Business:

13204 LAKESIDE TERR.
COOPER CITY, FL 33330

New Principal Place of Business:

Current Mailing Address:

5722 SOUTH FLAMINGO ROAD
#193
FORT LAUDERDALE, FL 33330

New Mailing Address:

FEI Number: 65-0918542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHURACK, ROBERT
13204 LAKESIDE TERR.
COOPER CITY, FL 33330 US

Name and Address of New Registered Agent:

SHURACK, ROBERT
5722 SOUTH FLAMINGO ROAD
#193
FORT LAUDERDALE, FL 33330 US

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

04/13/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHURACK, ROB
Address: 13204 LAKESIDE TERR.
City-St-Zip: COOPER CITY, FL 33330

Title: VP () Delete
Name: MARGO-SHURACK, LISA
Address: 13204 LAKESIDE TERR.
City-St-Zip: COOPER CITY, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHURACK, ROB
Address: 5722 SOUTH FLAMINGO ROAD #193
City-St-Zip: FORT LAUDERDALE, FL 33330

Title: VP (X) Change () Addition
Name: MARGO-SHURACK, LISA
Address: 5722 SOUTH FLAMINGO ROAD #193
City-St-Zip: FORT LAUDERDALE, FL 33330

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: ROB SHURACK

Electronic Signature of Signing Officer or Director

P

04/13/2004

Date