## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## May 01, 2007 08:00 AM Secretary of State **DOCUMENT # P99000044784** 1. Entity Name PROFESSIONAL BUSINESS & TAX SERVICES, INC. Principal Place of Business Mailing Address 7899 BAYMEADOWS WAY 7899 BAYMEADOWS WAY STE 6 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 04272007 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 59-3576873 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SARKAR, SUNIL K DO NOT WRITE 7899 BAYMEADOWS WAY STE 6 JACKSONVILLE, FL 32256 INTERS SPAR 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS POST TITLE KUMAR SARKAR, SUNIL NAME STREET ADDRESS 7899 BAYMEADOWS WAY STE 6 CITY-ST-ZIP JACKSONVILLE, FL 32256 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THE SEACH NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME U00000750350 STREET ADDRESS 05/18/07-80060-014 150.00 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-71P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other-like empowered.

**FILED**