

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095896

FILED
May 01, 2007
Secretary of State

Entity Name: PROANSWER INCORPORATED

Current Principal Place of Business:

13008 SW 120 ST
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

4717 LEE BLVD
LEHIGH ACRES,, FL 33179

New Mailing Address:

FEI Number: 65-0958298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, JHOANNA
8569 SW 211 TERR
MIAMI, FL 33189 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: SANCHEZ, ALTAGRACIA PRES.
Address: 13008 SW 120 ST
City-St-Zip: MIAMI, FL 33186

Title: OFFC () Delete
Name: BAEZ, CESAR
Address: 13008 SW 120 ST.
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: GARCIA, JHOANNA VP
Address: 8569 SW 211 TERR
City-St-Zip: MIAMI, FL 33189

Title: S () Delete
Name: GARCIA, STEPHANIE SECR.
Address: 8569 SW 211 TERR
City-St-Zip: MIAMI, FL 33189

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:

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: ALTAGRACIA SANCHEZ

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date