2008 FOR PROFIT CORPORATION May 01, 2008 08:00 Al Secretary of State **ANNUAL REPORT DOCUMENT # F04000002349** CONTEMPORARY SOLUTIONS-USA, INC. Principal Place of Business Mailing Address 20 E. MCDERMOTT DRIVE 20 E. MCDERMOTT DRIVE **ALLEN, TX 75002 ALLEN, TX 75002** CR2E034 (11/05) 04292008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0683228 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE

8.	3. 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.		

U00000939221 'Q&-80018-025-150**1**.00 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE NAME WALKER, MARK S STREET ADDRESS 20 E MCDERMOTT DR CITY-ST-ZIP ALLEN, TX 75002 SD TITLE SIDORUK, TREL W NAME STREET ADDRESS 626 N FRENCH RD #3 CITY-ST-ZIP BUFFALO, NY 14228 GIRARDI, JAMES J NAME STREET ADDRESS 626 N FRENCH RD #3 BUFFALO, NY 14228 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

IN THIS SPACE

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 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 supplied with the information indicated on this report or supplied with the information of the corporation or the receiver of 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 that it is not provided by the corporation of the corporation of the receiver of trustees empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Applied For

Not Applicable