## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000003745

2118 WALSH AVE., STE. 120

SANTA CLARA, CA 95050

Address: City-St-Zip:

Entity Name: ENTERPRISES GLOBAL SOLUTIONS, INC

FILED Jun 30, 2009 Secretary of State

Littly Na	ille. CIVICAL	RISES GEOBAL SOLUTIONS	, IIVC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
2116 WALSH AVE., STE. B SANTA CLARA, CA 95050				799 ROOSEVELT ROAD, 6/21 GLEN ELLYN, IL 60137			
Current Mailing Address:			New Maili	New Mailing Address:			
2116 WALSH AVE., STE. B SANTA CLARA, CA 95050			799 ROOSEVELT ROAD, 6/21 GLEN ELLYN, IL 60137				
FEI Number	: 77-0538464	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desire	ed ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
155 OFFIC SUITE A TALLAHAS The above	DE PLAZA DR SSEE, FL 323		purpose of changing	its registered	office or registered agent,	or both,	
SIGNATU							
	Electro	nic Signature of Registered Ag	ent	Date			
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution().	ot receive the prior notic	ce.			
OFFICER	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	THAKUR, SAW 2118 WALSH SANTA CLARA	AVE., STE. 120 A, CA 95050	Title: Name: Address: City-St-Zip:	THAKUR, SAN 2118 WALSH SANTA CLAR	AVE., STE. 120 A, CA 95050		
Title: Name: Address: City-St-Zip:	GHAI, UMESH	AVE., STE. 120	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name:	DS () GHAI, RITA	() Delete	Title: Name:	(	) Change ( ) Addition		

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.

Address:

City-St-Zip:

SIGNATURE: UMESH GHAI S 06/30/2009