

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087120

FILED
Feb 28, 2007
Secretary of State

Entity Name: TOTAL SERVICE SOLUTIONS, INC.

Current Principal Place of Business:

12157 W. LINEBAUGH AVE., #185
TAMPA, FL 336261732

New Principal Place of Business:

Current Mailing Address:

12157 W. LINEBAUGH AVE., #185
TAMPA, FL 336261732

New Mailing Address:

FEI Number: 59-3671221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARLOWE, RUSSELL G
9020 RANCHO DEL RIO
SUITE 101
NEW PORT RICHEY, FL 34655 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THOMPSON, JOHN F III
Address: 14309 BRENTWOOD DR
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: MIKLOS, STEPHEN J
Address: 6922 RIVER ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: WAGNER, PETER
Address: 2197 CALUSA CT
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMPSON, JOHN F III
Address: 4206 CARROLLWOOD VILLAGE CT.
City-St-Zip: TAMPA, FL 33618

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 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: J.F.THOMPSON

_____ Electronic Signature of Signing Officer or Director

DIR

02/28/2007

_____ Date