

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034381

Entity Name: ACEIUS SOLUTIONS, INC.

FILED  
Apr 24, 2004  
Secretary of State

**Current Principal Place of Business:**

13430 MALLARD COVE BLVD.  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

13430 MALLARD COVE BLVD.  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 59-3710579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALDRICH, STEVE  
13430 MALLARD COVE BLVD.  
ORLANDO, FL 32837

**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: PD ( ) Delete  
Name: ALDRICH, STEVE  
Address: 13430 MALLARD COVE BLVD.  
City-St-Zip: ORLANDO, FL 32837

Title: VD ( ) Delete  
Name: REIDY, GENE  
Address: 14214 COLONIAL GRAND BLVD., APT. 2207  
City-St-Zip: ORLANDO, FL 32837

Title: SD (X) Delete  
Name: MAMDANI, SADRUDDIN  
Address: 13439 MALLARD COVE BLVD.  
City-St-Zip: ORLANDO, FL 32837

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN D. ALDRICH

PD

04/24/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date