

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125058

Entity Name: ADMIN SOLUTIONS, INC.

FILED
Feb 22, 2005
Secretary of State

Current Principal Place of Business:

3400 NE 192ND ST
APT 1911
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

3400 NE 192ND ST
APT 1911
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 11-3664649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POVINA, MARIA E
16950 WEST DIXIE HWY
B338
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

POVINA, MARIA E
3400 NE 192 STREET
APT 1911
AVENTURA, FL 33180 US

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: MARIA E POVINA

02/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POVINA, MARIA E
Address: 16950 WEST DIXIE HWY APT #B338
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: D () Delete
Name: POVINA, JUAN M
Address: 16950 WEST DIXIE HWY APT # B338
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POVINA, MARIA E
Address: 3400 NE 192 STREET, SUITE 1911
City-St-Zip: AVENTURA, FL 33180 US

Title: D (X) Change () Addition
Name: POVINA, JUAN M
Address: 3400 NE 192ND STREET, SUITE 1911
City-St-Zip: AVENTURA, FL 33180 US

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: MARIA E POVINA

P

02/22/2005

Electronic Signature of Signing Officer or Director

Date